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Administration for Children and  
Families of Puerto Rico

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## GENERAL INFORMATION (D1)

### *State Agency Administering the CHILD WELFARE Programs*

#### **Department of the Family Organizational Structure:**

The Puerto Rico Department of the Family (DF) is the agency of the Government of Puerto Rico responsible for the provision of the diversity and/or variety of social welfare services. Originally, Puerto Rico Law No. 171 of June 30, 1968 created the Department of Social Services, which was reorganized under Puerto Rico Law No. 1 of July 28, 1995 as the Department of the Family. As an umbrella agency, four Administrations operate with fiscal and administrative autonomy. The Department of the Family's composition is as follows:

- Office of the Secretary
- Administration for Families and Children - AFC (ADFAN, Spanish acronym)
- Administration of the Socioeconomic Development of the Family (ADSEF, Spanish acronym)
- Child Support Administration (ASUME, Spanish acronym), enacted by PL 86, August 17, 1994
- Administration for Integral Development of Childhood (ACUDEN, Spanish acronym) PL-179, August 1, 2003

The Administrations are agencies dedicated to execute the public policy established by the Secretary, in the different priority areas of services to children and their families including the elder population. This includes the development and implementation of standards, norms and procedures to manage the programs and provide the operational supervision of the Integrated Services Centers (ISC) at the local levels. The regional level (10 regional offices) supervises the local offices.

They regional and local levels are responsible for implementing and developing those functions delegated by the Secretary through the redefinition and reorganization of the variety of services for the families including traditional services and the creation of new methods and strategies for responding to the needs of families. Work plans are prepared in agreement with guidelines and final approval of the Secretary.

The Department of the Family incorporates the following principles into its public policy:

The Government of Puerto Rico proposes to improve the quality of life of families through a better use of government resources, as well as community and faith-based resources; therefore, family and community involvement and participation are essential in adopting this administrative philosophy and in channeling public services.

The family is recognized as the fundamental unit of society, and government should facilitate the means by which families and their communities can effectively become part of the

design, planning, implementation and evaluation of services.

The organizational structure and delivery of services of the Department of the Family must respond to the characteristics of a changing family in terms of the roles of its members, educational level, income, status, structure, functions and problems that affect all its members.

Under this structure, the Administration of Families and Children is responsible for the provision of all child welfare services and for the administration of Title IV-E Program, in coordination with the Administration for Socioeconomic Development of the Family and the Child Support Administrations.

It should be mentioned here, that in January 2013, there was change in government administration as result of state elections. The new Secretary of the Department of the Family began the implementation of a new project, as part of the strategies to prevent Child Abuse and Neglect (CAN), named “Redes de Apoyo Familiar y Convivencia Comunitaria” (Networks of Family Support and Community Life).

This is an emblematic project of this new agency administration, designed and being developed by the Office of the Secretary with a strong support of the various Administrations that compose the Department of the Family, especially through ADFAN’s Assistant Administration for Prevention and Community Services. Its purpose is to promote the integral well-being of families living in communities where high risk factors have been identified, to strengthen parent-child/youths relationships, their social connections and their socio-economic development. Multidisciplinary Service Centers will be located in 6 of these communities, as pilot projects. The Centers will, also, be supported by collaborative agreements with agencies and organizations to enable them to meet the needs of these families in an integral and coordinated manner.

### **Administration for Families and Children Organizational Structure**

The Administration for Families and Children (ADFAN) central level was reorganized in January 2013 and returned to its original structure and functions.

- Administrator Office / Deputy Administrator
- Assistant Administration for Elderly and Adults with Disabilities
- Assistant Administration for Prevention and Community Services
- Assistant Administration for Child Protective Services
- Assistant Administration for Family Preservation and Support Services
- Assistant Administration for Foster Care and Adoption Services

### **CENTRAL LEVEL**

#### **Office of the Administrator and the Office of the Deputy Administrator:**

The Administrator is responsible, with the assistance of the Deputy Administrator, for the implementation of public policy established by the Secretary. They are responsible for

managing all services programs under the Administration, as well as supervising and evaluating the compliance of the work plans prepared in agreement with the Office of the Secretary.

Four of the Assistant Administrations (Prevention; Protection; Preservation; and Foster Care and Adoption), intervene in the provision of services within the continuum of child welfare services. Assistant Administrators are responsible for the formulation, development, implementation and evaluation of the norms, procedures and standards that services programs must adhere to. Social Work Specialists, in each Assistant Administration, keep up to date regarding federal regulations, local mandates, models of intervention, theories and new practices in the field of social work and child welfare. They are responsible for the development of new projects and intervention strategies designed to improve the services and responses to the changing needs of individuals, families, and communities. Policy recommendations are made based on identification and adaptation of demonstrated best practices and evidenced based models and practices. Assistant Administrators also assist the Administrator and the Deputy Administrator in insuring that funds are used according to the purposes of the legislative mandate and that service provision is monitored.

A number of offices maintain the organizational structure by providing administrative support:

The **Assistant Administration for Administrative Services** includes the Budget, Finance, General Services, Purchasing, and Facilities Contracting Division of ADFAN. This area provides support to the Office of the Administrator and all other components. The Administrator provides leadership in the planning, coordination and supervision of the execution of work plans of all the administrative components of this support area.

The **Office of Human Resources and Labor Affairs** plans, directs, coordinates and supervises all activities related to personnel administration in accordance with Government and Federal labor laws and regulations. The Director advises the ADFAN Administrator on all matters related to human resources and labor laws and regulations, and provides technical assistance to the managerial staff on the application of such regulations. This Office includes the Divisions for Classification and Retribution, Appointment and Changes, Recruitment, Staff Relations, Employee Services and Evaluation and Analysis.

The **Office of Legal Counsel** advises the Administrator on all legal aspects and plans and supervises legal procedures. In coordination with the Courts Administration and the Department of Justice of Puerto Rico, this Office is responsible for all legal procedures related to the minors and families served by ADFAN. The staff of this Office prepares and processes all contracts and other legal documents and represents the Administrator in legal forums in and outside of Puerto Rico.

The **Training Institute** evaluates training needs of staff of all the dependencies of the Administration and contracted community based organizations: Identifies and coordinates, or contracts with quality training resources for the provision of professional development services to fill identified needs. The staff of the Training Institute evaluates the effectiveness of the training activities in achieving objectives, and the participant satisfaction.

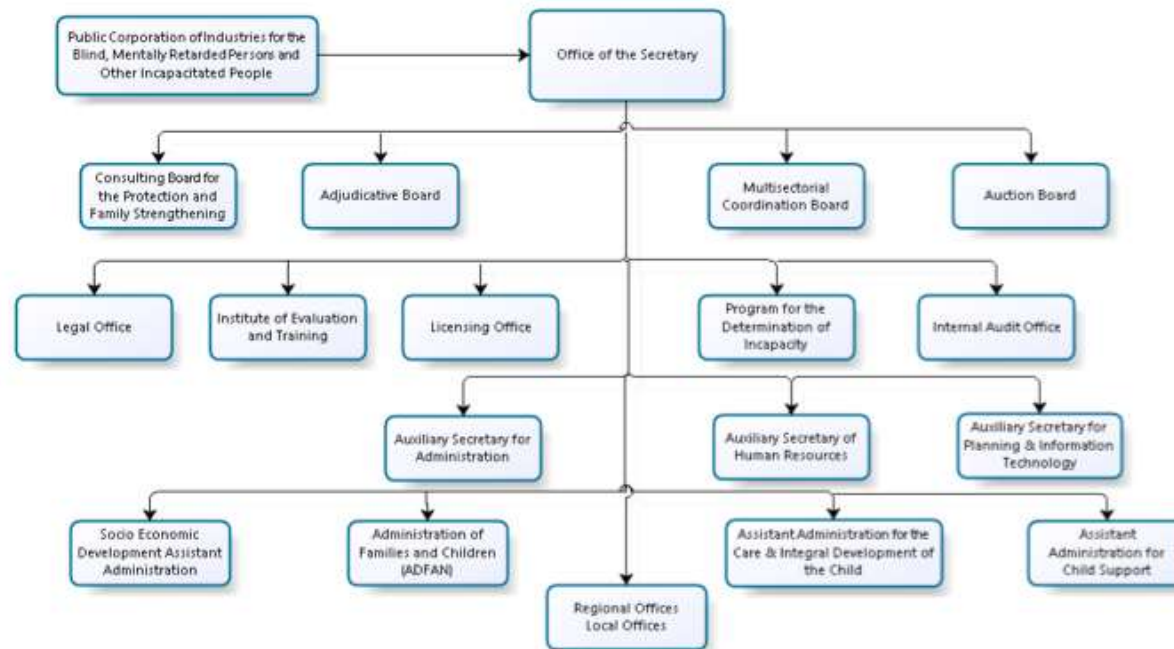
The **Quality Assurance Office** is responsible for designing and executing services reviews to

measure performance vis a vis services standards. It creates the findings reports that are shared with direct services staff, supervisors and management and solicits the corrective actions plans to the regional offices based on those findings.

The following are the organizational charts of the structure of the Department of the Family and ADFAN



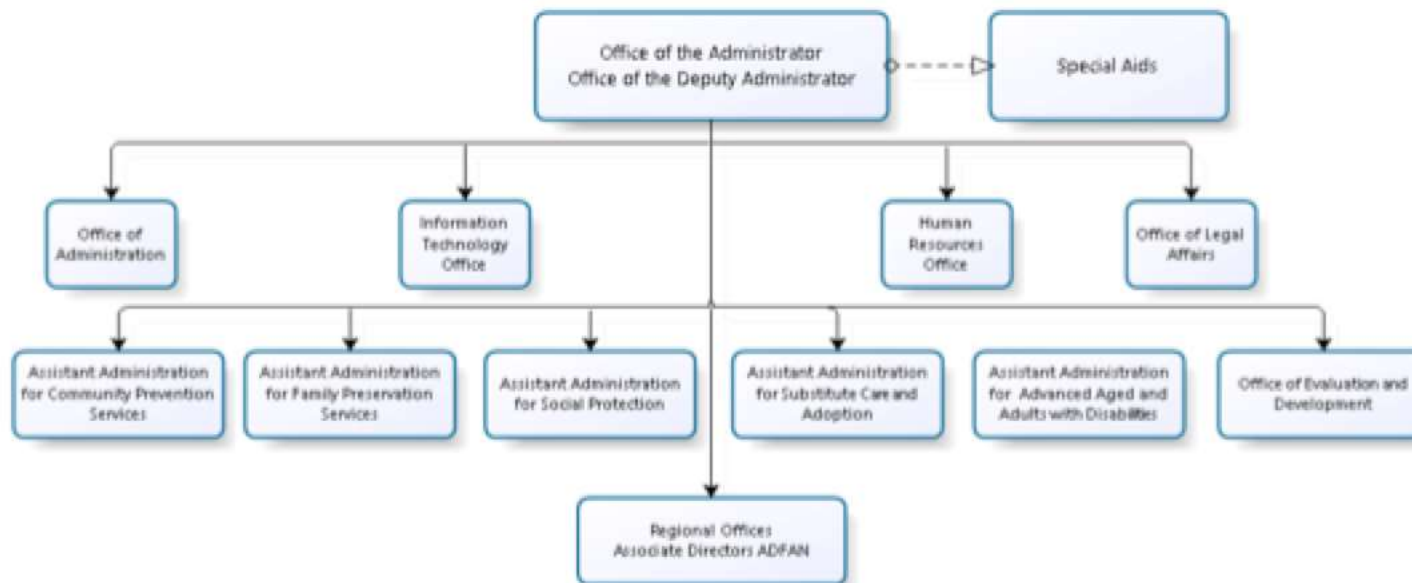
### Commonwealth of Puerto Rico Department of the Family **Organizational Chart**





Commonwealth of Puerto Rico  
Department of the Family  
Administration of Families and Children (ADFAN)

**Organizational Chart for ADFAN**





### Regional Offices and Local Offices – ADFAN



**The following is the link to the location of where the APSR will be located in the Agency's website:**

<http://www2.pr.gov/agencias/adfan/Pages/default.aspx>

**The following is the contact person for the CFSP APSR:** Rosa L Fuentes, Deputy Administrator, Phone #: (787) 625- 4900 x 1803, email address: [rfuentes@adfan.pr.gov](mailto:rfuentes@adfan.pr.gov) .

### *Vision*

*A leading, expedient, sensitive and facilitating agency in the provision and promotion of services of excellence to families and communities with human, fiscal and technological resources to achieve social justice.*

### *Mission*

*We are facilitators in the provision of preventive supportive and remedial services for families and communities to develop their strengths, capacities and self-sufficiency and enable them to be an integrated component of the Puerto Rico society.*

**The guiding principles to achieve the mission include:**

- Implement an integrated service delivery system organized around the needs of the family
- Build community capacity and develop partnerships to serve families
- Emphasize prevention and early intervention both at home and in the community
- Integrate and coordinate services effectively across systems
- Strengthen organizational and professional competence of the Agency

The basic values and beliefs to support the established child welfare goals of:

**Safety** – Children have the right to live in an environment free from harm and/or sense on impending harm.

**Permanency** – Children have the right to live in a permanent family setting with the opportunity to form lifetime relationships.

**Well Being**-Children have the right to be reared by primary caretakers who display sincere, dedicated responsiveness to the child's educational developmental, psychological and physical needs.

The Agency will use the mission, principles and values to focus planning efforts in developing and implementing the Program Improvement Plan (PIP) to attain a: **Competent Agency with a Broad array of Services with Client's and Community members fully engaged in pursuing child welfare best practices and outcomes for children and families.**

## Collaboration

During the process of transition, from the past to the new government administration, more than the usual public scrutiny took place, especially regarding the Department of the Family. The increased public interest had its positive results in that it drew the legislature, public agencies, various professional associations and community organizations to initiate contact with or respond to ADFAN's call for exploration of how they could contribute or bring about specific collaboration efforts. Since early 2013, these efforts have multiplied and strengthened. The PIP, which ADFAN intensively worked on during last year, was a significant catalyst and vehicle to, not only at working collaboratively on the PIP, but to develop stronger relations with other agencies and organizations.

The most mutually satisfying and fruitful one has been with the courts. Shortly after ADFAN approached the CIP Coordinator about the strategy on the training of agency attorneys, regarding the federal requirements on the different types of court hearings, CIP shared a copy of their State Plan. It became immediately evident that their objectives were amazingly similar to those ADFAN pursued on the PIP. This was a strong motivator, as we realized that by working closely together and sharing resources our mutually shared objectives had a real chance of being accomplished. This became a "self-fulfilling prophecy" in that we have produced measurable positive results, such as, improvements in the punctual filing, in the court, of the social reports by ADFAN's social workers, notifications of hearings to caretakers, interviewing of minors by the Family Affairs Advocate in San Juan, in the cases in which the new court reporting guide is being used, the reports have improved in content and in the organization of the information, which makes the easier to carry out the procedures during the hearings and others. Next steps in this collaboration is the interfacing of the information systems that both ADFAN and the courts are developing and the expansion of the cross training strategy to other topics, such as youth in transition to adulthood. The vehicle for these specific collaborations (design, development and implementation) with the CIP is the central level committee that originated with the PIP and continues to meet regularly. The CIP and ADFAN committed in our respective Strategic plans (T. IV-E PIP, Chafee) the goals described above.

Another vehicle for the collaboration will continue to be the Task Force of the Children's Justice Act. The CIP Coordinator has been recommended to the Governor for designation as part of the Task Force. For FFY 2015, the Task Force plans to continue working on the activities that had previously been selected. One of the Tasks Force's main interests continues to be the improvement of the statistical information that Puerto Rico has on child maltreatment, so that the different agencies concerned with this problem can make informed decisions on how to address it. Through the discussions in the Task Force we learned that many agencies collect data manually, which affect the quality of the data. The agencies that are more advanced in their data collection, such as ADFAN and the Court Administration, will continue to share information and join efforts to improve the information on child maltreatment. The task force continues to sponsor the project with the *Institute of Statistics* to develop a compendium of statistical reports based on ADFAN's NCANDS data base, which is contained in our information system (SIRCSe). This will include the creation of a cyber-page on the Institute's portal, analysis

and publication of the statistical data and the creation of demographic profiles. The preliminary reports are being validated. The task force is also involved with the development of the *Child Advocacy Centers* in Puerto Rico. The Task Force paid for the training of the personnel assigned to this center, but additional training is needed for CPS investigators and other professionals that intervene with the minor and his family. This training has been scheduled for September 2014 and will the different professional disciplines that are represented in the task force will be participating. ADFAN, the Depts. of Health, Justice, Education, the Courts, the Police, the Adoptive Parent Association, Legal Aid Services, Office of the Ombudsman for Persons with Disabilities and the Adult former victims of child abuse and neglect will soon be collaborating with the needs assessment of the role and performance of the agencies that intervene in the CPS continuum of intervention. Once the report is submitted task force members will assess the recommendations of the researchers and will establish priorities for implementation.

The approach used by ADFAN in the review of progress made in the past fiscal year and during the last five years by stakeholders have been characterized, at policy and at operational levels, by concerted actions to involve and to keep its governmental, community and other stakeholders involved in the mission of protecting children and providing direct services to families. As of 2009 with the Statewide Assessment, the CFSR in 2010 and since then there has been a continuous process of not just *looking at ourselves in the mirror* but working in partnership with stakeholders to design, modify, implement, monitor, measure results, report and take corrective actions, in a continuous process. Out of this, specific agreements have been incorporated in the Plan developed for the next 5 year period. For example, ADFAN and the Courts have initiated conversations for the interface of information through the new information systems that each agency is developing and the development other training initiatives using the cross training strategy; Casey will continue to work with ADFAN on the development of the Differential Response strategy, T. IV-E and the continuation of the ones implemented and found helpful during the PIP, such as the Round tables.

ADFAN has renewed its collaborative agreement with the Casey Foundation which assures continued partnership. Beginning in January 2014 three areas were added to the agreement with Casey: Title IV E, Differential Response and Adoption services. In regards to Differential Response, this is a major project that consists of studying and designing the strategy. The action plan was initiated and other community partners have accepted working with ADFAN on it.

Members of the *Transectorial/Multisectorial Board* have various projects in process, such as the revision and input of its members regarding the design and implementation of community prevention strategies presented the *National Plan for the Prevention of Child Maltreatment in Puerto Rico* and according to the role of each agency or organization.

In regards to how stakeholders and courts have been involved in key aspects of the 2015-2019 CFSP development, it is pertinent to repeat here the approach used in the by ADFAN in the review of progress made in the past fiscal year and during the last five years by stakeholders. The process has been characterized, at policy and at operational levels, by concerted actions to involve and to keep its governmental, community and other stakeholders involved in the

mission of protecting children and providing direct services to families. As of 2009 with the Statewide Assessment, the CFSR in 2010 and since then there has been a continuous process of not just *looking at ourselves in the mirror* but working in partnership with stakeholders to design, modify, implement, monitor, measure results, report and take corrective actions, in a continuous process. Out of this, specific agreements have been incorporated in the Plan developed for the next 5 year period. For example, ADFAN and the Courts have initiated conversations for the interface of information through the new information systems that each agency is developing and the development other training initiatives using the cross training strategy; Casey will continue to work with ADFAN on the development of the Differential Response strategy, T. IV-E and the continuation of the ones implemented and found helpful during the PIP, such as the Round tables.

The Child Protection Law of Puerto Rico No. 246 of December 16, 2011 established in its public policy statement the principle of “shared responsibilities” among public government agencies, in conjunction with the child welfare agency, the Puerto Rico Department of the Family, and community organizations to work together in the attention and prevention of child abuse. This statement describes the government vision regarding the direction that interagency collaboration should take.

Since early 2013, collaboration efforts have been strengthened. During the process of transition, from the past to the new government administration, there has taken place more than the usual scrutiny, especially regarding the Department of the Family. The increased public interest has had positive results in that it has drawn the legislature, public agencies, various professional associations and community organizations to initiate contact with or respond to ADFAN's efforts to explore how they can contribute or to bring about specific collaboration efforts.

On December 2013, PL 158-2013 was approved, establishing specialized services for the evaluation of sexual abuse allegations, following the model of the Child Advocacy Centers. The law mandates the Department of Health and the Department of the Family to provide services in this area in a joint effort with the Police Department, Justice Department and Department of Education to provide the specialized services for this population of children. The Law approved the creation of 6 centers to provide services island wide, these centers will be modeled after the “Child Advocacy Centers” recommended by the “National Children’s Alliance”, the centers will have an “Immediate Rapid Response Component” that will coordinate the services of the child advocacy centers, intervention protocols will be developed to assure the quality of the services, the centers will be part of a network of service providers that will facilitate the movement of referrals and avoid duplication of services, each center will have a community interagency board that will meet every two months to facilitate service delivery and interagency coordination, personnel working in these centers will be trained prior to initiation of operations, the legislature will provide recurrent financial support to the centers for a minimum of six years, and annual performance reports will be submitted to the Legislature. Meetings to design protocols of intervention and initiate interagency coordination already began. As of July 2015, implementation should be completed.

The Board of the “Association of Psychology of Puerto Rico” is actively working to operationalize a proposal submitted by ADFAN, which identifies the need for psychological evaluation services using standardized diagnostic tests, evaluation of the emotional needs of children and their parents through a process of observation and interviews, participation in interdisciplinary case staffing, as external stakeholders in the foster care Case Review Boards, as consultants in situations that present a degree of complexity where the worker needs additional support to guide his/her intervention and with training.

The “Puerto Rican Foundation for the Investigation and Prevention of Suicide” is interested in offering support to direct service staff in the form of training efforts tailored to meet the needs of direct service staff who works with youths and adults that are engaging in high risk behaviors that can be life threatening. ADFAN is in the process of identifying what the particular emphasis of the training should be, the characteristics (age, location, etc.) of our youth population and the staff that need will be the target audience for this training.

During the past year, two Citizen Review panels were active and rendered its reports of findings and recommendations to the Agency. As will be explained in later in this document, ADFAN recently responded to the Panels recommendations.

One of the reports dealt with the Intensive In-Home Preservation Services. Recommendations in general were accepted and for the next period ADFAN will work in strengthening the Units and services geared to maintain children safe at home and prevent entries or reentries to Foster care.

The second report dealt with an evaluation of the Independent Living Service. Most of the recommendations are already in place or are, in fact, part of the norms and procedures of the service. ADFAN will work to deliver service more effectively and to expand services to more youth.

ADFAN has a signed collaborative agreement with Casey Foundation, which has resulted in the effective implementation of the Roundtables strategy in three regions: San Juan, Caguas and Guayama and the Team Decision Making strategy in Carolina and Humacao. Furthermore, the QA Office developed and has implemented an evaluation plan that has found positive results for both staff and children. Beginning in January 2014 three areas were added to the agreement with Casey: Title IV E, Differential Response and Adoption services.

Through the Children’s Justice Act Task Force, ADFAN has benefited from collaborative efforts that have focused in training of ADFAN’s caseworkers and supervisors, law enforcement, prosecutors, health care professional, judges from the Superior and Supreme Court, health professionals and services providers. Training covered themes related to child abuse or neglect, adoption, identification of trauma, permanency plans and others. Seven regions have been trained, and during the next semester the three remaining regions will be trained.

For FY 2014, the projects and activities proposed include: entering into a collaborative contract with the Puerto Rico Institute of Statistics, to develop a compendium of statistical reports based on ADFAN’s child abuse and neglect (CAN) data base. This will include the creation of a cyber-



page on the Institute's portal, analysis and publication of the statistical data and creation of demographic profiles; support interagency efforts to create a pilot Child Advocacy Center and to support the Child Death and Citizen Review Panels.

ADFAN participates with the Administration of the Courts in the Court Improvement Program. The CIP integrates staff from the Department of Education, Health Department, Juvenile Institution Administration, Legal Aid Services, Social Workers professional association, Mental Health Department. The agenda is geared toward facilitating services to families and children in order to achieve permanency. As part of the program, in the Bayamon Courts a liaison from ADFAN is available to coordinate services.

As part of efforts to improve services in child protection we are working on the study, analysis and implementation of a differential response model. The work carried out in the past year 2013, with the situation found in the area of protection, led us to develop work plans to investigate thousands of referrals in arrears. The process ultimately led research work involving many areas within the agency and contracted services. The elaboration of the work plan to investigate the referrals in arrears involved the different components in the study of strategies, through meetings held in order to be effective in our work and give participation to the service staff in identifying strengths and limitations. The College of Professional Social Workers participated in the recommendations made to address the crisis associated with the referrals in arrears and other deficiencies that pointed to the lack of effective supervision. This leads us to training activities of the staff to give them the tools to better function of their role. Training of supervisors has already initiated through contracted services with the College of Professional Social Workers. Importantly, in the five years plan ADFAN will continue to work with the training and coaching team, with the aim of improving the time at the start of the investigation.

Demand and the significant backlog of referrals have challenged the Agency's capacity to meet the demand for service. This forced us to make an analysis and develop new ideas to improve services and respond more assertively to each situation. It was found that a significant number of referrals received were unsubstantiated, 84%, according to data collected in the aforementioned investigation last year. This aspect leads us to evaluate other alternatives considering that some of the situations encountered in service have to do with the amount of referrals and as I am is leading efforts in one direction. We understand that we must establish collaboration with other agencies and services that allow us to assess and manage those situations that do not involve risk to different types of assessment and intervention and direct research efforts towards situations that involve risk if safety minors. We have started collaboration with court personnel, association of social workers, community-based agencies and personnel protective services agency

The purpose is to continue the study of the model at the same time we get technical assistance for the development of the model in PR. This involves the analysis of our procedures and services offered as collaboration area known through technical assistance as would be the best way to implementation based on our needs and for the benefit of our families. We must be able to receive training and technical assistance. Also work with the training staff of the agency.

Collaboration in the process of this strategy come from the Courts Administration, College of Social Workers, regions of ADFAN, protection services, quality assurance ,legal division, personal preventive community-based agencies. This initiative arose from the need to change the way they are treating referrals from CPS. The approach stems from a current system that is saturated referral in which the agency responds to all through a research, this results in a significant amount of referrals under lower risk categories dilate time in be addressed so the start time is impacted in the investigation. The investigation of a referral takes time and the time that we do not address low-risk situations can cause situations get complicated and affecting the safety of children. The claims ADFAN get through this model otherwise intervene in these situations and strengthen partnerships through networking of services in community-based agencies. At the stage of work in which we find we are just doing the analysis of the situation of our welfare system.

To explore the feasibility of this model we intend to maintain this working group whose members represent professional disciplines, community-based organizations and agency staff with experience in intervention and the provision of services for the welfare of children and their families. This group will explore the challenges of depicting child abuse in PR, the response model, the experiences in the implementation in the U.S., legal implications, aspects of mechanization and collaboration between public and private organizations.

We are using "Casey Family Programs" specialized TA to develop policies and practices in the development of this project to improve our system of child welfare assistance.

ADFAN will be focusing, as of this year, on making improvements in the process of stakeholder or partner involvement in the CFSP/APSR progress review itself. We will be contacting Deborah Martinez, TTACC Coordination Specialist, to request technical assistance with a national resource center.

### **QA Collaboration with stakeholders**

It is planning to integrate the stakeholders and courts personnel in key aspects of the state plan 2015-2019. In the review of the data, we will be training lawyers and case managers of the Court Program Justice for children on the CFSR instrument, so that they know the way in which ADFAN is evaluated according to the services provided to children and families. Also through the interviews made by the reviewers of Quality Assurance (QA) is obtained relevant information about the vision that have the stakeholders, caregivers, foster parents and judicial personnel about how it can improve the ADFAN services from their perspective. This information will be taken as lessons learned from the interview process and will be notified to the Administration to integrate it into the work plans in order to improve services.



TA will be offered at each of the regional offices to assist management with the development of their individualized improvement plans. Social Worker Specialists will be participating in the TA. We will be offering TA right after the report of findings is shared with the regional offices.

The information that will be obtained helps to support the curricula of training of the ADFAN, as well as to the staff of the agency. Cross Information will be used of the Court Improvement Project (CIP). Information obtained from Quality Assurance also helps regional offices to focus the scope of their regional improvement plans.

Also in union with staff of the Department of Health, the Integral Health Services to Adolescents Program will be training QA personnel on the issue of paternity in adolescents in order to create programs to discuss these matters proactively in primary and secondary prevention and to observed quality in that services. Stakeholders will also be included through the co-sponsorship of training with the Office of court administration, through face-to-face meetings, e-mails in the planning and execution of training cross between our staff and theirs. One of the themes is expert testimony.

Furthermore, training calendars will be established between the staff of the Institute for Development of deficiencies and the Director of the Pediatric Hospital of Puerto Rico for the ADFAN social workers. The objectives of these trainings consist of the following:

- Discussions about the nature of the intervention with families of children with disabilities under the custody of the State.
- Identified as cognitive therapies for trauma intervention could be implemented with the family of children with disabilities.
- Examine the key elements of the physical, social, emotional development in children of early age
- Identify indicators that require referral and evaluation.

Another strategy that will be integrated into the Quality Assurance Office will be the establishment of a practice center for students of Master in Social work of the Graduate School of Social Work for Beatriz Lassalle of the University of Puerto Rico, Río Piedras Campus.

Two students have been interviewed to make its practice of monitoring in the Quality Assurance Office. This practice is related to the processes of monitoring of program according to federal standards and requirements. Is expected to continue to be Center of practice in subsequent years.

## Collaboration -Training

ADFAN has established agreements and contracting with community agencies such as the Institute for Developmental Disabilities, part of the Medical Sciences Campus of the University of Puerto Rico, the Staff Training and Development Office of the Courts Administration and the College of Social Work Professionals of PR. In particular, it has established collaborative agreements with the Court Administration Staff Training Office which will impact the achievement of goals and objectives for the next period of 2015-2019. The Staff Training Office is responsible for the implantation of these contracts and collaborative agreements.

In order to comply with the results of Safety, Permanency and Wellbeing, an educational resource room will be established as part of a "novel" initiative that will open the way to strengthen best practices in our agency. Experiences in the resource room will be guided by a Coach Supervisor, based in a skill develop and interactive adult model education. In recognition of the expertise of the professional staff of the Institute for Developmental Disabilities, affiliated to the Medical Science Precinct of UPR, is submitting a proposal requested by ADFAN to provide training to 40 case managers from the Social Protection Service on the issue of Child Development (0-5 years) using the simulator baby as the main strategy.

We also identified the strategy of establishing a Model Local Office, which can be integrated students of Social Work field practice with the case management staff. This strategy would allow monitoring the experience of transfer of learning to the work setting, mentioned in the curriculum of supervision as "Field Experience Coaching Practice."

Staff of ADFAN's Training Office will continue collaborative coordination with the Office of Training and Development of Court Administration to develop trainings on topics of testimony in court and social report, these include practical exercises, Half-yearly reports on the findings of QA / CFSR and law 246 among others. Recently, coordinating began with the Dean of Ongoing Police Academy to provide training, on the issue of Domestic Violence where Child Abuse situations coexist, to supervisors and trainers of the 13 police areas, according to the parameters of the federal agreement reform of the Police Department No. 3:12-cv-2039 (GAG).

In addition to this, Dr. Manfredo, Director of the Office of Training, has been included as part of the learning community on Complex Trauma. This community is established convened by the Central University of the Caribbean, affiliated the Addiction Technology Transfer Center Network and Administration for Mental Health and Anti- Addiction Services (ASSMCA), among others. This effort seeks to establish a network of treatment services for complex trauma in children and adolescents; it is considered that this professional relationship will prosecute the efforts of our staff training in this area, to success.

Furthermore MSW, Hector Rivera-Flores is a case reader in the Quality Assurance Office, currently he is in the stage of doctoral dissertation to obtain their degree of clinical psychologist, in the Carlos Albizu University in San Juan Puerto Rico, and this is a university accredited by the American Psychological Association (APA). The theme of his research is: ***Training program in***

***PTSD in children and adolescents victims of violence domestic for social workers who work with cases of protection to minors in the Administration for families and children of the Department of the family*** © Rivera Flores (2014). The product of this work will be of benefit to those social workers to develop skills in the subject of resilience, trauma and risk factors and protective factors in this population.

For the next period, the Staff Training Office will request annual technical assistance to the National Resource Center for Permanency Planning and Family Connections from New York for the following issues:

- Permanency Planning
- Family In Home Services

We will seek technical assistance with the National Resource Center for Child Protective Services, affiliated to Action for Child Protection in Maddison, Wisconsin:

- Continuous Develop of Safety Model (annual)

We will also seek technical assistance in the CQI Training Academy:

- Continuous Quality Improvement in Child Welfare- annual for ADFAN Staff, Social Work Specialist, Supervisors and Associate Directors.

We will also be participating in the preparation for the On Site Review (CFSR) from federal level at the island to the fiscal year 2018.

## ASSESSMENT OF PERFORMANCE AND PLAN FOR IMPROVEMENT (D2.D3)

This five year plan supports the activities outlined in Puerto Rico's Quality Improvement Plan (Puerto Rico's Program Improvement Plan as required by the Federal Child and Family Services Review /CFSR process), and based on the second round CFSR results.

Goals/objectives and services have been designed to address and achieve CFSR standards.

### *Safety Outcome 1*

Puerto Rico is not in substantial conformity with Safety Outcome 1 and the CFSR 2010 identified inconsistent practice to initiate the response to child protection report in a timely manner and in establishing face to face contact. Last PIP worked with the implementation of a Safety Model and as part of 2010 findings we are still in need to continue the development of the Safety Model throughout the life of a case to guarantee that safety is the first concern on report Assessment and Investigation and Case Management.

CFSR 2010, Safety Outcome 1. The result was substantially achieved in 39.1 percent of the cases examined. This percentage is lower than the 95 percent required for a determination of substantial conformity. The result is substantially achieved in 43 percent of Aguadilla's applicable cases, 33 percent Bayamon applicable cases, and 40 percent of cases of San Juan applicable. In addition, Puerto Rico met the national standard for the national indicator data on the absence of recurrence of maltreatment.

However, Puerto Rico's performance in relation to national indicator data on the absence of maltreatment of children in foster care, foster parents or facility staff cannot be assessed due to data quality concerns identified in the CFSR data profile and evaluating statewide. The main conclusion from this result is that the 2010 CFSR case reviews identified inconsistent practice in initiating a response to reports of child abuse in a timely manner and the establishment of a face to face contact with children

Puerto Rico began in the PIP a series of strategies to increase the safety of children in protective services in response to the findings of the monitoring practice in 2010, where was evident: Inconsistent practice in regard to initiating a response to child maltreatment reports in a timely manner and establishing face-to-face contact with children.

This amendment of the Safety Manual was completed in April 2013, and trainings to all direct service employees in the research process. Efforts were centralized to cover those areas of inconsistency in response times, reinforcing the Safety model. Assignment of response set, allowing being coordinated from hotline, a rapid response service for children. Were extended time on the priorities response referrals. We canalize the risk situations of abuse to another

level service orientation that a preamble to the possibility of implementing a process to address the aforementioned lower risk with another approach and a process that is not research.

Importantly, our goals will be aimed at strengthening the processes established in the Safety model since implemented changes take a year and considering that the hotline was not part of the implementation of the security model at the agency for the year 2009.

Last measurement through QA and evidenced in the matrix 8, December 2013, Puerto Rico reported a 61.5% on the timeliness of investigation of child abuse referrals. In terms of repeat abuse, and as evidenced by the latest report from NCANDS, Puerto Rico has 5.1%.

Considering these results, the work plan established for the next five years includes the following:

**Goals:**

Child safety, permanency and wellbeing will be the Paramount for ADFAN's staff at all levels, on CPS intervention/ services delivery.

**Safety 1**

**Objective:**

Improve timeliness of initiating investigations of reports of child maltreatment.

**Actions Step:**

- Training of direct service and supervisory staff
- Coaching
- Quarterly reports are established to illustrate level of improvement achieved

**Safety 1**

**Objective:**

Prevent child abuse in Foster care

**Action Step**

- Establish a workgroup to include, the Institutional Child Abuse Units workers, personal from residential facilities, supervisors and external stakeholders for development curriculum training for staff and foster parents.
- Training to strengthen staff competencies in prevention of child abuse in foster care
- Training the foster parents and personnel in residential facilities for the prevention of child abuse.

## *Safety Outcome 2*

Children are safely maintained in their homes when possible and appropriate.

For the CFSR 2010, Puerto Rico is not in substantial conformity with this Outcome. The outcome was substantially achieved in 36.9 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity.

The 2010 CFSR case reviews identified the following concerns in many of the cases reviewed:

- Appropriate services were not provided to families to safely maintain children in their homes.
- The lack of services in some communities and the lack of sufficient ADFAN staff made it difficult for ADFAN to provide the services needed by families.
- There was a lack of ongoing safety and risk assessments.
- There were safety concerns in the children's homes that were not addressed by the agency.
- New incidents of child maltreatment reported on cases already opened for services were not investigated consistently.

The Administration for Families and Children in Puerto Rico developed on December 2010 a Program Improvement Plan (PIP) in response to the findings from the Federal Child and Family Services Review (CFSR). For the safety concerns Puerto Rico established one primary strategy, Strengthen the ADFAN Safety Model aimed at ensuring processes are in place, and supported by effect supervision to ensure children are safe throughout all stages of services delivery.

In the past PIP Puerto Rico clarified the areas of ambiguity in CPS policy of the Safety Model requirements to ensure child safety assessments are conducted throughout the life of the case in all stages of service delivery and created a protocol for completing initial and ongoing risk and safety assessments for children and families particularly in family preservation cases and children in foster care.

This protocol incorporated the stages of the Family Centered Generalist (FCG) Model adopted by ADFAN, to sustain positive outcomes for Safety, Permanency and Well-being for children and families. The principal goal was to improve appropriate assessment, intervention and evaluation for families and children addressing their specific needs with the appropriate services.

The other strategy implemented for ADFAN was to develop coaching strategies for supervisors to promote the effective application of the Safety Model and requirements to ensure child safety assessments are conducted throughout the life of the case in all stages of services delivery particularly in family preservation cases and children in foster care. This strategy incorporated the supervisors to guide and support the strengthening of case worker's practice of the FCG Model.

ADFAN developed training modules for supervisors and all staff, using the critical discussion methodology of the case and it has been already trained **637** workers and supervisors.

Although Puerto Rico PIP was designed and approved in December 2010, work began in January 2013, one year before it was supposed to completed. Strategies related to these Items were accomplished but the implementation of some of them began a few months ago. The results

reflected in the reports done by Q.A. in December 2013 showed that for Item 3 –Services to families to protect children in home and prevent removal or re-entry into foster care was 14.7%, when it was expected to reach 24.7%.

Cases with Strength in this Item were those in which services were provided to prevent readmission of children to foster care. Or if there was a minor who entered foster care within the period under review and no services were offered that this action to be justified ensures the child's safety.

Most cases that apply to this Item are in Preservation, because if children are removed before the period under review and have no younger siblings in the biological home this Item does not apply to evaluate. The review results in Preservation cases are low because there is no evidence of the services offered or minors have been removed without identifying the services.

For Item 4 risk assessment and safety management, Puerto Rico in December 2013 reached 7.5% when the target is 17.9%. The areas assessed in this Item are addressed during the period under review:

- 1) An initial assessment and safety risk to the child or family was too held, if the case was opened during the period under review;
- 2) A continuous assessment and safety risk to the child or the family was held during the period under review;
- 3) If there were concerns related to security that were not worked properly by the Agency (examples: referrals discarded improperly, allegations of mistreatment by the family but were not formally referred or investigated, delays in accepting an allegation of abuse to an investigation or assessment, allegations of abuse were not substantiated, despite evidence that he had sustained a basis or that the case was closed prematurely);
- 4) Evaluate the safety concerns on family visits;
- 5) Evaluate the safety concerns on foster parents, family members of the foster parents, other children in the home or foster care facilities and staff;
- 6) Remove the child from a foster care home or return it to his parents for a provisional period.

Cases that had strength in this Item were those in which there were documented informal assessments of the risk and safety of children both in the biological home as in the location placement, in the family visits or at the withdrawal from foster care.

QA findings reflect that evaluations are mostly informal and can be observed if the case workers documented in the progress notes that verified the safety of children on site location and you can see he is safe. If there were security concerns in some family visit and these were attended it is also classified as Strength. In cases where no visits were reported during the period under review, the area is automatically applied to be improved as it has no contact with children and do not know if they are safe.

It is required to continue working to achieve the standards set by the CFSR 24.7% in Item 3 and 17.9% in Item 4.

**Following goal 1;** for the next five years Puerto Rico is proposing the following:

**Objective: 1**

Improve services to family to protect children in the home and prevent removal or re-entry into foster care

Actions Step:

- Training to strengthen staff competencies in the evaluation of safety
- Continuous coaching through the Quality Circle in safety management and documentation
- Develop policy instructing to coordinate SIPH for families with an in-home safety plan, included families in the process of reunification and redefining SIPH eligibility criteria.
- Expand and strengthen SIPH Units Island wide.

**Objective: 2**

To improve intervention in CPS situations with emphasis on risk assessment and safety management

Actions Step:

- Continuous coaching in safety management and documentation
- Align TDM strategy with safety model criteria for services/safety plan development and conditions for return or modifications to permanency plan.

**Technical Assistance and evaluation and Implementation support**

To achieve these objectives we will have the support of the Quality Assurance Office, for each quarter who will submit the information from the review of cases. The inclusion of several of the trainings required was discussed with the training office to be included in the training plan. Is expected to receive the collaboration of resource centers for technical assistance on security issues and the strategy of TDM

*Permanency Outcomes 1 and 2*

The 2010 CFSR determined that Puerto Rico was not in substantial conformity with Permanency Outcome 1. The outcome was substantially achieved in 12.5 percent of the cases reviewed, less than the 95 percent required for a determination of substantial conformity. The 2010 CFSR case reviews found that foster care reentry was a rare occurrence. However, the 2010 CFSR also identified the following concerns in many of the cases reviewed:

- Puerto Rico was not consistent with regard to ensuring placement stability for children in foster care.
- Children's permanency goals were either not appropriate or not established in a timely manner.



- Puerto Rico had not sought TPR in accordance with the requirements of ASFA.
- There was a lack of concerted effort to achieve reunification or guardianship in a timely manner.
- There were delays in achieving adoptions in a timely manner.
- Puerto Rico was not consistent with regard to ensuring that children with a goal of OPPLA had a permanent placement and/or were receiving services to ensure a successful transition from foster care to independent living.

The 2010 CFSR determined that Puerto Rico was not in substantial conformity with Permanency Outcome 2. The outcome was substantially achieved in 50.0 percent of the cases reviewed, less than the 95 percent required for a determination of substantial conformity.

The 2010 CFSR case reviews found that Puerto Rico was effective with regard to placing children in close proximity to their parents, and, in many cases, the Commonwealth made concerted efforts to ensure that the connections of children in foster care were maintained. However, the 2010 CFSR also identified the following concerns in many of the cases reviewed:

- Children were not consistently placed with their siblings.
- The frequency and quality of visitation between children in foster care and their parents and siblings were insufficient to meet the needs of the children and families.
- ADFAN had not made concerted efforts to search for either maternal or paternal relatives as potential placement resources.
- ADFAN had not made concerted efforts to support the child's relationship with the mother or father while the child was in foster care.

#### **Item 7: Permanency goal for child: (Permanency 1)**

| <b>Goal expected by the Federal level to the Q8</b> | <b>ADFAN Q8 Result</b> |
|---|------------------------|
| <b>26.8%</b>  | <b>31.9%</b>           |

Areas that are evaluated in this item are that during the period under review (1) the goal of the permanency plan is specified in the file, (2) that were established in the required time, (3) that were appropriate to the child's needs and circumstances of the case, (4) which is completed the application or request of deprivation of parental authority in the established time, according to federal law (if the child has more than 15 months in foster care or if you have less than 15 months and the criteria specified in the ASFA law).

The strengths identified in this item are compliant with all required areas and in the case of deprivation of parental authority that has a justified reason to have not deprived of parental authority, if applicable.

While the cases in which there areas to improve, in their majority, are identified with minors who have more than 15 months in foster care, have other plans for permanent life goals and have not been deprived of parental authority and there is a reason indicating why this determination. Neither the reasons for the changes of the goals are justified in plans of permanence or the reason why you change target to establish which was changed in the time required.

**Item 10: Other planned permanent living arrangement: (Permanency 1)**

| Goal expected by the Federal level to the Q8 | ADFAN Q8 Result |
|--|-----------------|
| 15.8%  | 31.7%           |

Areas that are evaluated in this item are that during the period under review (1) that reasonable efforts were made to provide services to the minor him preparing properly for an independent life when comes out of foster care (must be provided for young people of 16 years and older or children of any age with a goal of economic emancipation/independence); (2) if reasonable efforts have been made to place the minor in a permanent living arrangement (is the place where the child will be placed until it is discharged from foster care).

The strengths identified in this item is that it can be identified on the record that the child have a place of location established for long-term and are given support necessary to prepare it to an independent life.

While the cases where it does not identify those independent living services are offering or that the place where the minor is located is not long-term and not documented special circumstances which justify the determination are classified as area to improve.

For FY's 2015-2019, ADFAN will continue working toward achieving permanency for children with the following strategies (see D3 section for a detailed plan):

- Continue and expand the use of the Team Decision Making strategy
- Continue and expand the use of the Round Table strategy
- Continue with the Cross-Training entitled: ***“Childhood and Adolescent Welfare: Integration to Speed Up the Permanence Plans”***, in coordination with the Courts Administration for the remaining regions: Caguas, Carolina and Humacao.
- Develop an exit plan for all minors between the ages of 18 and 21, with other permanent life arrangements not found under the Independent Living Services
- Achieve the permanence of every minor with a primary adoption plan.
  - Early detection of every minor deprived of custody by the regional committees to refer them to the Adoption Unit.

- Develop the competence and skills of the Adoption Unit SW and Supervisors to improve the quality of the analysis and development of the social research conducted on applicant families.

### *Well-being Outcomes 1, 2 and 3*

**Well-Being Outcome 1:** Families have enhanced capacity to provide for their children's needs

Puerto Rico is not in substantial conformity with Well-Being Outcome 1. The outcome was determined to be substantially achieved in 23.1 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 30 percent of the 40 foster care cases and 12 percent of the 25 in-home services cases.

The 2010 CFSR identified the following concerns in many of the cases reviewed:

- ADFAN did not make concerted efforts to assess and address the service needs of mothers, fathers, foster parents, or children, although children in foster care were more likely to have their needs assessed and met than parents or children in the in-home cases.
- The agency did not make concerted efforts to involve children, mothers, and fathers in case planning in both the foster care and in-home services cases.
- The frequency and quality of caseworker visits with children, particularly children in the in-home services cases, were not sufficient to ensure the child's safety and well-being.
- The frequency and quality of caseworker visits with parents were not sufficient to monitor the safety and well-being of the child or promote attainment of case goals.

**Well-Being Outcome 2:** The 2010 CFSR determined that Puerto Rico was not in substantial conformity with Well-Being Outcome 2. The outcome was substantially achieved in 74.5 percent of the cases. This percentage is less than the 95 percent required for a determination of substantial conformity.

The 2010 CFSR case reviews found that, in general, the educational needs of children in foster care were assessed and addressed. However, in 50 percent of the 10 applicable in-home services cases, educational needs were not assessed or addressed, although education-related concerns were apparent and a reason for agency contact

**Well-Being Outcome 3:** The 2010 CFSR determined that Puerto Rico was not in substantial conformity with Well-Being Outcome 3. The outcome was substantially achieved in 50.9 percent of the applicable cases. This percentage is less than the 95 percent required for a determination of substantial conformity. The 2010 CFSR case reviews found that the physical,

dental, and mental health needs of children are not assessed and/or addressed consistently; however, children in foster care are more likely to have needs assessed and addressed than children in the in-home cases.

The Administration for Families and Children in Puerto Rico developed on December 2010 a Program Improvement Plan (PIP) in response to the findings from the Federal Child and Family Services Review (CFSR). ADFAN established different strategies. One of them was to continue the implementation and improvement of the Family Centered Generalist (FCG) Model, to sustain positive outcomes for Safety, Permanency and Wellbeing for children and families. The emphasis on this strategies is, among others, in family participation and involvement on services plan, comprehensive and individualized assessment, values and practices of the Model, involvement of the absent parent, and Safety Plan. This included the development of training modules for supervisors and all staff that can progressively build a competency base aimed at promoting child and family well-being and parent child sibling and family relationships to promote permanency.

The other strategies was to promote knowledge and skills building on supervisors to guide and support the strengthening case worker practice in the Family Centered Generalist Model through the use of coaching practice focused on promoting improvement in the frequency and quality of casework contact with children and parents. This training is offered and quality circles were established. The first topic discussed with supervisors was visits planned with the family.

Additional part of the strategies to response to the findings of the CFSR in this outcome, ADFAN included the systemic factor of service array and strengthen the engagement of different partners in the protection, safety, well-being and permanency of children through better communication and cooperation in order to provide individualized appropriate in time, child centered and family focused services. . The result was the achievement of various agreements, interagency and with municipalities to provide services to children in the areas of greatest need. These strategies were completed in December 2013. However timing for implantation may be a factor by which even the results are still not satisfactory. In reading QA December 2013 the results were as the following Item:

- Item 17: Needs and services of child, parents, and foster parents  
Outcome at December 2013, **15.0%**

This Item evaluated whether during the period under review (1) an initial evaluation was conducted and (2) whether the services provided were appropriate to meet the identified needs. These two areas are evaluated for the child, the parent and foster parents (the latter applies to foster care cases).

In most cases the result is that Area Needing Improvement because the evaluations and services to foster parents are not documented. The assessments that are made about the needs of children or parents are not documented.

- Item 18: Child and family involvement in case planning  
Outcome at December 2013, **18.6%**

For this Item is evaluates if during the period under review was provided to the minor active involvement in the case. According to the CFSR this means that if is appropriate and agrees to their age and stage of development, the Agency consulted with they: the goals of case and the services needed; if the plan was explained in a language that the children could understand and if they are included in regular meetings regarding the plan, specifically if any changes would be made to the same, etc.).

To be evaluated as Strength, the above information must be documented. According to case review results, this degree of detail is not being documented in the case file. If this information is not evidenced, the Item is classified as an Area that Needs Improvement.

- Item 19: Caseworker visits with child  
Outcome at December 2013, **4.1%**

In this Item are evaluated the visits during the period under review. Assessed the case manager visits conducted less in place location in the stipulated time, depending on the stage of the case. According to rules of ADFAN visits must be made at least once a month if the child is in Puerto Rico and every 6 months if you are outside the country. Also is evaluate if the visits are of sufficient quality and to work with matters pertaining to the safety, permanency and well-being of the child, the achievement of the goals of the event is promoted and be focused for example on issues pertinent to case planning, service delivery and achievement of goals.

There are several situations that can cause this Item is not classified as Strength. First home visits that are not made according to the stages of the Security Model. Secondly that the documentation in the record not the same quality are evident therefore should be classified as subsection Area to Improve.

- Item 20: Caseworker visits with parent(s)  
Outcome at December 2013, **1.9%**

In this Item are evaluated the visits of the caseworker to the father and mother during the period under review to ensure that:(1) the visits was in the stipulated time were provided according to the stage of case, and (2) that the visits are of sufficient quality and to work with matters pertaining to the safety, permanency and well-being of the child and promote achievement of the goals of the case.

There are several situations that can cause this Section is not classified as Fortaleza. First home visits are not made according to stages of Model Safety Case Management. Secondly, in the case file there is no evidence of the quality of the visits. For these reasons they should be classified as Item Area that Needs Improvement.

Some of the variables that contribute to poor results are obtained in these Items are:

- Recruitment of recent TS / TSF, after ADFAN had lost a substantial amount of front line staff.
- PIP Strategies have been implemented for a short period of time.
- Various strategies are being implemented simultaneously, which requires for a caseworker and supervisor to attend different trainings and meetings.
- Work units are being restructured
- Delay in CPS investigations and participation of caseworkers in the investigation of cps reports (crash program).

Following the goal 1, for the next five years in the well-being outcomes, Puerto Rico proposed the following strategies:

**Objective:**

Enhance families' capacity to provide for their children's needs through the provision of adequate services.

**Actions Step:**

- Describe Agency procedures to comprehensively assess and document the needs of children, parents and foster parents and the service necessary to achieve case plan goals
- Design training curriculum for workers and supervisors.
- Continuous coaching through the Quality Circle for strengthen and Increase the frequency, quality and documentation of casework visits with children, parents and foster parents.
- Develop guidelines for planned visits to parents / mothers, including the father / mother including the absent parent (non-custodial parents)
- Develop schematic guide for assessing family needs including the identification of special needs in the minors and link such appropriate services required by the family.
- Develop intervention protocol according to the developmental stages of children.
- Clarify Family conference policy by establishing the benchmarks the case workers need to complete during the commitment and evaluation stages to involve the family in case planning
- Develop professional competencies in supervisory staff to enable them to design appropriate services plans for the families and children.
- Develop guidelines for the physical, cognitive and behavioral stages of development.
- Continue holding Family Conferences (TDM) in the two (2) pilot regions (Humacao and Carolina)

- Expand the Family Conferences (TDM) to two (2) additional regions (Arecibo and Aguadilla)

### **Technical Assistance and evaluation and Implementation support**

To achieve these objectives it will have the support of Quality Assurance Office for each quarter who submitted the information from the review of cases. The inclusion of several of the training required and was discussed with the training office to be included in the training plan.

### *Information System*

Puerto Rico is not in substantial conformity with the systemic factor of Statewide Information System. The 2010 CFSR determined that Puerto Rico does not have a statewide information system that readily identifies or captures information regarding the status, demographic characteristics, location, and placement goals for all children in foster care.

Additionally, information gathered during the 2010 CFSR indicates that there are concerns about the accuracy of data pertaining to placements, permanency goals, legal status, and demographics because of the months-long delay between manually completing data entry forms at the local level and inputting the data into the Information System and Follow-Up for Children Located Outside of the Home (SIS) at the regional level.

The PIP that was subsequently designed addressed this systemic factor with the following primary strategy: *The ADFAN statewide information system will be strengthened to ensure Puerto Rico has the data and technology capacity to ensure child safety and permanency data are uniformly collected in a timely manner and are sufficient to satisfy federal requirements.* It was designed to be accomplished through several actions steps: the promulgation of policy requiring, as of October 1, 2013, the punctual, accurate and continuous entry of data into the SIRCS and SICStA information systems on the legal status, demographic characteristics, location, and placement goals for each child in care, upon entry into Foster Care and when placement information changes; an action plan to implement policy and for monitoring the timeliness and accuracy of data entry; the development and implementation of an action plan to assure the timely submission of AFCARS data that produces valid results for the four federal CFSR Permanency Composite national Data Indicators (PCs): PC 1- Timeliness and Permanency of Reunification; PC 2- Timeliness of Adoptions; PC 3- Permanency for Children and Youth in Foster Care for Long Periods of Time; PC 4- Placement Stability and the development and implementation of action plan for the timely submission of NCANDS data that produces a valid result for the federal CFSR National Data Indicator Safety 2: Absence of Abuse/Neglect in Foster Care.

Against the odds, ADFAN was able to complete all the action steps; however, the effort did not produce the valid baselines. The labor intense data entry endeavor consumed the limited time available, at both the managerial, local and regional office levels. Realistically, it did not allow

for dilution of staff efforts, during the period of data entry, which began in November and ended in December 31. Consequently, that effort overshadowed the action plan for the implementation of policy and for the monitoring of the timeliness and accuracy of data entry into the SIRCSe and SICStA information systems. ADFAN is now concentrating efforts on developing a work plan, with the participation of system users, to change the organizational culture, from manual to electronic documentation of case files.

The first week of June, committee members held three focus groups, in the regional offices of San Juan, Carolina and Arecibo to explore, from user's perspective, barriers to the timely, continuous and accurate entry of data in SIRCSe and SICStA. Groups ranged in size from 16-20 participants, representing the specialized units (investigations, adoptions, information systems coordinators, substitute care, Licensing unit, AFCARS) a local office worker, supervisor and director, Regional Supervisor and Associate Director. The major barriers identified by users were the poor translation of screens from English to Spanish, or screens totally in the English language, need for training or re-training, information entered is erased by the system or cannot be viewed and lack of computers or equipment is outdated and slow. Staff sees as benefit moving into a mechanized culture and eager to do so and to do the administration has to be more consistent in its efforts to do so.

The transition from one government administration to another, in January 2013, was marked with lack of information that prevented a smooth transition. In the mist of the baseline effort, management came face to face with deficiencies in the piloting of SICStA, the application and other issues that substantially contributed to not being able to produce a valid baseline. Committee members sub-divided into subgroups to explore some issues further. As a result, there is a report available that identifies the screens where the language used is English, others where the information has been poorly translated, templates of forms that are not similar to the paper equivalent, so users opt to not use them, the Safety model incorporated into the system is not the same as the one adapted by PR, the T. IV-E module and the financial module need to be updated, there has been no training on the information systems in years, likewise, there is no consequence if users continue to use paper to document their cases, in spite of policy requiring the contrary.

A compliance report on each of the standards set in policy for the timely and continuous use of the information system is now available, based on data entered into SICStA. Data on compliance for the period covering January-May 2014 corroborates that data entering standards are not being met and the pattern is very fluctuating:

Key

- Cumple: meets the standard
- NC: does not meet standard
- CRD: Created
- ACT: Up-dated



- \* Case assignment within 24 hours of being received in the local office,

| Ene-2014 |     | Feb-14 |     | Mar-14 |     | Abr-2014 |     | May-14 |     |
|----------|-----|--------|-----|--------|-----|----------|-----|--------|-----|
| Cumple   | NC  | Cumple | NC  | Cumple | NC  | Cumple   | NC  | Cumple | NC  |
| 23%      | 77% | 11%    | 89% | 47%    | 53% | 41%      | 59% | 63%    | 37% |

- \* Demographic data of the child within 24 hours of case assignment,

| Ene-2014 |     | Feb-14 |     | Mar-14 |     | Abr-2014 |     | May-14 |     |
|----------|-----|--------|-----|--------|-----|----------|-----|--------|-----|
| Cumple   | NC  | Cumple | NC  | Cumple | NC  | Cumple   | NC  | Cumple | NC  |
| 11%      | 89% | 56%    | 44% | 40%    | 60% | 22%      | 78% | 31%    | 69% |

- \* Initial placement within 24 hours of case assignment

| Ene-2014 |     | Feb-14 |     | Mar-14 |     | Abr-2014 |      | May-14 |      |
|----------|-----|--------|-----|--------|-----|----------|------|--------|------|
| Cumple   | NC  | Cumple | NC  | Cumple | NC  | Cumple   | NC   | Cumple | NC   |
| 5%       | 95% | 1%     | 99% | 2%     | 98% | 0%       | 100% | 0%     | 100% |

- \* Legal action within 24 hours of case assignment;

| Ene-2014 |      | Feb-14 |     | Mar-14 |     | Abr-2014 |     | May-14 |     |
|----------|------|--------|-----|--------|-----|----------|-----|--------|-----|
| Cumple   | NC   | Cumple | NC  | Cumple | NC  | Cumple   | NC  | Cumple | NC  |
| 0%       | 100% | 17%    | 83% | 14%    | 86% | 20%      | 80% | 39%    | 61% |

- \* Permanency plan of each child in substitute care within 30 calendar days from the child's removal from the home;

| Ene-2014 |      | Ene-2014 |      | Ene-2014 |      | Abr-2014 |      | May-14 |      |
|----------|------|----------|------|----------|------|----------|------|--------|------|
| Cumple   | NC   | Cumple   | NC   | Cumple   | NC   | Cumple   | NC   | Cumple | NC   |
| 0%       | 100% | 0%       | 100% | 0%       | 100% | 0%       | 100% | 0%     | 100% |

- \* Placement changes of each child in substitute care within 48 hrs. of the change

| Ene-2014 |     | Feb-14 |     | Mar-14 |     | Abr-2014 |     | May-14 |     |
|----------|-----|--------|-----|--------|-----|----------|-----|--------|-----|
| Cumple   | NC  | Cumple | NC  | Cumple | NC  | Cumple   | NC  | Cumple | NC  |
| ***      | *** | ***    | *** | ***    | *** | ***      | *** | ***    | *** |

\* New placement resources

| Ene-2014 |     | Feb-14 |     | Mar-14 |     | Abr-2014 |     | May-14 |     |
|----------|-----|--------|-----|--------|-----|----------|-----|--------|-----|
| CRD      | ACT | CRD    | ACT | CRD    | ACT | CRD      | ACT | CRD    | ACT |
| 41       | 24  | 37     | 89  | 114    | 191 | 73       | 51  | 47     | 382 |

Comments:

\* Summary Reports provide the total number of providers created or updated during this period.

\*\* If the initial placement is not entered in SICStA during the reporting period, the report indicates no data is available.

\*\*\*If there are NO PLACEMENT CHANGES recorded during the reporting period, the report indicates no data is available.

Poor data quality is being reflected in recent efforts at generating statistics based on the NCANDS data base information in the SIRCSe information system. In some information fields, there is a significant level of missing information as illustrated on the following data:

**Determinación de Referidos Año Natural 2013 del Universo de 38,438 Referidos**

| Determinación  | Adultos con<br>impedimento<br>(18-59) | AdultosMayores<br>(60 +) | Menores<br>(0-17) | Total |
|--|---------------------------------------|--------------------------|-------------------|-------|
| Dato no Disponible al momento de la<br>generación del Informe(Data not<br>available) | 492                                   | 4226                     | 16086             | 20804 |
| Bajo investigación(under investigation)  |                                       |                          | 3473              | 3473  |
| Con Fundamento(Substantiated)  |                                       |                          | 4063              | 4063  |
| Sin fundamento(Not Substantiated)  | 7                                     | 86                       | 7509              | 7602  |
| Infundado (falso/false)  |                                       |                          | 19                | 19    |
| No localizado o fuera de Puerto Rico<br>(not located or not in PR)                   |                                       |                          | 47                | 47    |
| OtraAcción (other action)  |                                       |                          | 2430              | 2430  |
| Total  | 499                                   | 4312                     | 33627             | 38438 |

In other fields missing Information is within reasonable limits:

**Víctimas de Maltrato: Género y Clase de Maltrato para Año Natural 2013 de un universo de 7,644 Menores Víctimas de Maltrato**

| Género  | Familiar | Institucional | Total |
|---|----------|---------------|-------|
| Dato no disponible al momento de la generación del<br>Informe<br>(Data not available) | 8        | 4             | 12    |
| Femenino(femenine)  | 3821     | 80            | 3901  |
| Masculino(masculine)  | 3670     | 61            | 3731  |
| Total   | 7499     | 145           | 7644  |

With a completion target date of December 2014, ADFAN has contracted for the development of a new mechanized system that will be its core case management tool. It will collect relevant information about management of referrals, investigations, family preservation, foster care and adoption. It will set the "official record of the case" with its full and updated history, and documentation the case management of all children and families served by ADFAN. It will, also, enable compliance with federal reporting requirements for AFCARS, NCANDS and NYTD.

This system incorporates the creation of a unique identifier that will facilitate the creation of "a family a record." Data collection at the Hotline level will be aligned with the Safety Model interview protocol with the reporter that, in turn, is aligned with the safety Model protocol. It will also search for previous referrals to avoid duplication of data. Furthermore, it will capture and present information to allow case managers to make informed conclusions and decisions; will include alerts to notify case managers of action to be taken in a timely manner to comply with laws and regulations, will allow for implementation of discrete versus narrative documentation to accelerate and improve the quality of the data values and will direct the workflow so that it is aligned to the Safety model.

Regarding NYTD, the system will have the following features: Collection of survey data of the population served, baseline and follow-up; keeping a historical record of the respondent groups and it will generate file for federal NYTD.

Finally, as a data visualization tool, it will have the capacity of: generating profiles and metrics; generation of information for decision-making; availability of information to improve supervision; monitoring of trends and of abnormalities; generation of statistical information and it will display data graphically for better interpretation.

Strengths of the systemic factor:

- System capacity to transmit the AFCARS file from SICSTA
- System capacity to track the status, demographics, current location, and permanency goals for children in foster care
- System's capacity to generate performance reports, regarding: case assignment within 24 hours from the receipt in the local office; entering demographic data of the child, initial placement and legal action within 24 hours of case assignment; entering the permanency plan of each child in substitute care within 30 calendar days from the child's removal from the home; entering placement changes of each child in substitute care within 48 hrs. of the change and daily entering of new placement resources
- A new integrated system case management information system is being developed that will help better respond to the needs of ADFAN in servicing children and their families.

Areas to improve/concerns:

- Data accuracy is an island wide concern, it needs to greatly improve in terms of completeness and accuracy

- Staff has not made the transition from paper to electronic documentation of case file
- SICStA needs to be enhanced to correct the deficiencies described above

#### Plan for Improvement of the Information Systems

- **Primary Strategy:** ADFAN's efforts are focused on developing a technological platform that integrates the Hotline, SIRCSe (NCANDS), AFCARS (SICStA) and Family Preservation cases. It will facilitate the documentation of safety intervention, according to the stages of the Generalist Practice model, from the receipt of the referral to case closing. Additionally, the plan entails some improvements in the functionalities of both SIRCSe and SICStA to ensure Puerto Rico has the data and technology capacity to ensure child safety and permanency data are uniformly collected in a timely manner and are sufficient to satisfy federal requirements. Upon completion of these enhancements, ADFAN will have a Case Management Integrated System (CMIS) solution. A considerable amount of effort is also dedicated to the adoption by staff of the mechanized system and move away from paper case documentation. This plan is also presented as a second, but concurrent major effort concerning the information system.
- **System Enhancement Plan (CMIS project).** The enhancements for this project are divided in four main services or phases. Each of these phases includes its own System Development Life Cycle (SDLC) activities related to requirements gathering, systems design, development, unit/system/user acceptance testing and implementation. Below we present a summary of the key functionality to be integrated or developed for each of the phases. The estimated timeframe for completion of this project is March 2015.

| Phase                                      | Key Functionality  |
|--|--|
| I. SIRCSe Integration to the CMIS solution | <ul style="list-style-type: none"> <li>✓ Integrate SIRCSe functionality including call management and data gathering during the call (received by hotline) including: referrals, social emergencies, orientations, and alerts.</li> <li>✓ Integrate SIRCSe functionality for data gathering and management of referral investigations.</li> <li>✓ Integrate and/or develop functionality related (but not limited) to: <ul style="list-style-type: none"> <li>○ Intake Management - Record contact/referral, collect intake/referral information, search for prior history.</li> <li>○ Screening - Evaluate intake information, record results of screening evaluation, establish referral record, assign case to worker, refer for investigation and/or services as appropriate.</li> <li>○ Investigation - Search for prior history (persons/incidents), collect and record investigation information, record investigation decision, \</li> <li>○ Determine/record and perform risk and safety</li> </ul> </li> </ul> |

|                        |  |
|------------------------|--|
|                        | <p>assessments.</p> <ul style="list-style-type: none"> <li>○ Generate documents as needed in response to investigation (i.e. alerts, notifications, reports).</li> <li>○ Collect/record special needs/problems (education/medical) for the minors</li> <li>○ Collect/record needed services.</li> </ul> <p>✓ Use of a unique id applicable for victims, responsible, and perpetrators.</p> <p>✓ Generation of NCANDS file.</p> <p>✓ Migrate data in SIRCSe to new solution.</p>  |
| 2. Family Preservation | <p>✓ Analysis, configuration, development, testing and implementation of case management workflow for family preservation cases. Currently, all case management for Family Preservation cases is performed manually. The Administration for Families and Children (ADFAN) established new policy requirements for initial and ongoing child risk and safety assessments throughout the life of cases across all stages of service delivery (as part of the efforts for the PIP) thus these enhancements will include the standards and procedures established in the “Child Protective Services Safety Intervention and Case Management Manual”.</p> <p>✓ Generate documents as needed in response to case managements (i.e. alerts, notifications, reports, service plan)</p> |
| 3. NYTD                | <p>✓ Incorporate into solution the services provided to our youth and appropriate data fields required as part of the served population for the NYTD file.</p> <p>✓ Generate alerts when a minor is close to his/her 17<sup>th</sup> birthday and other alerts as needed.</p> <p>✓ Provide access to answer survey questions for the baseline and follow-up populations</p> <p>✓ Generate NYTD file including the identification of the minor with the unique identifier.</p>  |
| 4. BI-Reports          | <p>✓ Use of business intelligence (BI) tools to facilitate the generation of reports, alerts throughout the life of the case.</p>  |

Adoption of the Information Systems by the staff.

| Strategy   | Action Steps   | Benchmarks                                  | P Responsible /time   |
|--|--|---|---|
| <b>Objective: Gaining buy-in by staff and improving practices regarding the use of the information systems.</b>  |  |   |   |
| Ensuring that the information systems are <i>useful</i> and <i>usable</i> for staff, by conducting a comprehensive review of all the screens, by content | <p><u>SICStA</u></p> <ul style="list-style-type: none"> <li>• TA on NJ Spirit information system, arranged by RO, and provided by the State of NJ Department of Children and Families/Office of Information Technology to learn about full system capabilities, lessons learned in the implementation process, cultural</li> </ul> | a. Trip to NJ and consultation carried out. | a. June 9, 2014/<br>Deputy Administrator,<br>Data Committee member<br>(Edna Díaz), Softek Reps<br>(2) |

owners.

- change, and others. TA included ADFAN staff and vendor representatives.
  - Logic Information behind NJS: RO arranged for NJS to share with ADFAN the source code. This will be used as a reference, to ensure that the (CMIS), being developed by PR, meets the standard federal requirements.
  - Identification of modules that are not operational and will be discarded for immediate use.
  - Identification and correction of poorly translated screens.
  - Screens (forms, letters, others) up-dated to reflect current law requirements, agency norms, procedures and standards.
  - Conduct usability testing by experienced systems' users, to identify problems or difficulties that discourage use of the system and need to be corrected.
  - Vendor to design solutions.
  - Users- access to all users and roles up-dated
- b. Transmission of Logic Information behind NJS.
  - c. Modules identified
  - d. Translation corrected in order of priority.
  - e. Screens (forms, letters and others) up-dated
  - f. usability tests scheduled and carried out
  - g. Solutions designed and implemented in the system (Priority will be given to the ones related to generating the AFCARS file).
  - h. Agile, uniform procedure to simplify manner in which users are up dated and security levels are maintained
  - i. Agile, uniform procedure designed by vendor.
  - b. August 2014/M Vega, IT consultant
  - c. August 2014/ Data Committee members, Regional System Coordinators, Deputy Administrator, Softek.
  - d. August 2014- on-going Data Committee members, Regional System Coordinators, Deputy Administrator, Softek
  - e. August 2014/ Data Committee members, Regional System Coordinators, Deputy Administrator,
  - f. August 2014 and on-going.
  - g. August 2014- December 2014
  - h. September 2014/Softek
  - i. September 2014/Softek
  - j. 2014- 2019

- Providers-develop uniform procedure for clean-up of existing providers, on-going entry of new providers and maintaining providers up-dated.
  - Associate Directors and regional Supervisors to assure errors are corrected within the expected margin of time.
- j. Errors corrected as evidenced in the nightly Batch run, Report measuring compliance with data entry standards set in the June 2013 policy and other data entry QA efforts.

- a. FN-81 completed, routinely
- b. All information data elements completed
- a-b. 2014- 2019/UIE Supervisors

### SIRCSe

- a. FN-81 completed to facilitate case migration from SIRCSe
- b. All information data elements are completed

### CMIS

The effort described above to bring SICStA and SIRCSe up to date is essential for the successful implementation of the CMIS

Communicating, clearly, the purpose and benefits of the integrated case management information system and including the on-going and punctual entry of data in SIRCSe and SICStA to ensure that required information is captured in both systems.

Strengthening the Help Desk to

- a. Develop a vision and mission statement of ADFAN's Integrated Information System
- b. Routine reports and announcements in ADFAN's newsletter and other means to communicate ADFAN's vision/mission regarding the information system, including that it is here to stay, that it is an agency priority, and progress achieved by regions or individual services programs, on systems updates that are being worked on or implemented.
- c. Obtaining ADFAN's staff e-mail distribution list (island wide) to assure the newsletters and other communications are sent to all system's users and not just the Associate and regional Directors
- a. Identification of current problems with the Help desk that discourages systems'

- a. Visión/Mission statement approved.
- b. Routine reports and announcements
- c. Distribution List obtained and used
- a. Problems identified and corrected

- a. December 2014/Administrator
- b. August 2014- 2019/Regional System Coordinators
- c. July 2014/Deputy Administrator
- a. August 2014 and on-going/Softek, Data

|  |   |   |   |
|--|---|---|---|
| become more responsive to systems' users | use.  | b. Standards developed/reviewed and compliance monitored  | entry Committee   |
| Targeted training                        | <p>b. Establishment and monitoring of performance standards for the Help Desk.</p> <p>a. <i>The training need for each user will be identified.</i></p> <ul style="list-style-type: none"> <li>• A 'refresher course' will be provided to users that were originally trained on SIRCSe or SICStA, and that remain in the same job position and service program.</li> <li>• Full scale training will be delivered to new staff and to experienced staff that was never trained on the system, (for example, adoption units). It will also be provided to staff that was trained and promoted from direct service to a supervisory position.</li> <li>• Supervisors will have additional training on the use of the system from the perspective of the supervisor.</li> </ul> <p>b. The original training materials will be used, thereby reducing the effort involved.</p> <p>c. Users will also be grouped by the service program they work for, so they pay special attention to the systems' features that are directly related to their daily work.(Adoptions, Substitute Care, Licensing, UMI, IV-E, Independent Living, SIS, Supervisors, direct service workers, UIE and so on.)</p> <p>d. Information will be collected from users during the training sessions about systems pitfalls that need to be addressed, including gaps in policy and others. Training will be initiated with the Information System Coordinators.</p> <p>e. Training will be delivered in a hands-on learning approach, in a room set with computers.</p> <p>f. Training groups will average 10 trainees and will be led by a presenter and a coach.</p> <p>g. Training on the new integrated information system will also be delivered in the targeted manner, described above.</p> | <p>a. Training needs for each user identified</p> <p>b. Original training materials will be used</p> <p>c. Users grouped according to training need.</p> <p>d. Information about System's pitfalls collected</p> <p>e. Hands-on training</p> <p>f. Small training groups.</p> <p>g. CMIS training (c-f)</p> | <p>b. December 2014 and on-going/Softek and Data entry Committee</p> <p>a-b-c-d-e-f-g August-December 2014/Softek, Regional System Coordinators, Data Entry Committee</p> |
| On -Going Coaching and other supports    | <p>a. Coaching will continue after the training and will be provided by the Information System Coordinators.</p> <p>b. Coordinators will further develop their competencies on the information system and on coaching skills through training and other supports.</p> <p>c. Creation of a virtual library that will include:</p>  | <p>a. Coaching Plan</p> <p>b. On-going training activities for coaches</p> <p>c. Virtual library created</p>  | <p>a. October 2014/QA Director, Deputy Administrator</p> <p>b. November 2014 and on-going</p> <p>c. December 2014</p>   |



|  |   |   |  |
|--|---|---|--|
| Identification of visible and tangible results that meet the most urgent agency needs and that staff also identifies as a gain for them. (win/win situation) | <i>“how to tips”, programmatic manuals and other pertinent information.</i>   |   |  |
|  | <ul style="list-style-type: none"> <li>a. Prioritize and target individual regional, service program and agency wide results or benefits that are very tangible and visible, to use them as selling points. Some of these could be worked concurrently. (Ex. Entering all required data into SICStA will substitute paper forms, will free time from SIS staff that could better be used in other system tasks, will enable the transmission of AFCARS from SICStA and produce a valid baseline).</li> <li>b. Structure as short term deliverables.</li> <li>c. Communicate the results achieved agency wide or by individual regions or services program.</li> </ul> | <ul style="list-style-type: none"> <li>a. Identification of the ‘what’s in it for me’ factors</li> <li>b. Short term deliverables</li> <li>c. Targeted results achieved communicated</li> </ul> | a-b-c. August 2014-2019/Regional System Coordinators, Data entry committee |
| Naming of the new integrated case management system  | <ul style="list-style-type: none"> <li>a. A contest or another mechanism will be used to name the new integrated system, with significant participation of system users.</li> </ul>   | <ul style="list-style-type: none"> <li>Name selected</li> </ul>   | December 2014  |

**Objective: Continuous Entry of all the data requirements, for all the children under custody, with an open case during any part of the period beginning on October 1, 2013 and forward.**

|   |   |  |  |
|---|---|--|--|
| Coordination of Units at the regional level | <ul style="list-style-type: none"> <li>a. Develop a strong coordination between the support/service units that depend on this inventory (IV-E, Finance, SIS, Legal Units, Substitute Care, Licensing and local offices) to create a master inventory that is kept up-to-date, with reliable information and that will be shared by these service units.</li> <li>b. Master Inventory of children in substitute care will be used to double-check and assure that all children that are in this inventory also entered into the information system to have all the children in the AFCARS, NYTD, IV-E, and financial/payment files.</li> </ul> | <ul style="list-style-type: none"> <li>a. Written instructions by each Associated Director about procedure to be implemented in each region.</li> <li>b. Master Inventory</li> </ul> | <ul style="list-style-type: none"> <li>a. August-October, 2014/Associate Directors</li> <li>b. August-October, 2014/Associate Directors</li> </ul> |
| Emphasis on results and Quality Assurance   | <ul style="list-style-type: none"> <li>a. Visits to each regional office by ADFAN Administrator and Sub-administrator to require achievement on specific performance standards, including the punctual and on-going entry of reliable NCANDS AND AFCARS data into the information systems.</li> <li>b. To give Local, Regional Supervisors, Information Systems Coordinators, Associate and Regional Directors access to</li> </ul>   | <ul style="list-style-type: none"> <li>a. Visits Schedule</li> <li>b. Access given</li> </ul>  | <ul style="list-style-type: none"> <li>a. August 2014/Administrator, Deputy Administrator</li> <li>b. September 2014/Softek</li> </ul>             |

the compliance reports developed to measure performance on standards set on policy to ensure that the legal status, demographic characteristics, location, and placement goals and placement changes, for each child in foster care, are entered into SICStA in a timely manner and are readily available upon entry to care.

- |   |   |                                 |
|---|---|---------------------------------|
| c. Associate Directors will monitor weekly performance and take the necessary actions to assure compliance. | c-d Improvements in the level of compliance | c-d. November 2014 and on-going |
| d. Night run of cases entered, errors/missing data identified   |   |                                 |

**Objective: Revise and take necessary actions to assure that only the cases that need case management services are the ones that are opened in the Family Preservation Services Program.**

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| To create a master Inventory      | All cases to be reviewed and cases for closing will be identified.                                | Master Inventory of Family Preservation cases                 | December 2014/Associate directors, Regional Supervisors                |
| Case closings                     | Cases closed will be closed in the system by completing FN-81 in SIRCSe                           | Only cases needing case managing service will remain open.    | December 2014/Associate directors, Regional Supervisors                |
| Trainings                         | Training on the CMIS  | Training  | March 2014 and on-going/Softek, IT consultant                          |
| Cases documentation in the system | Each case manager will enter and document case intervention as soon as he/she completes training. | Cases entered and documented on-going into the CMIS platform. | March 2014 and on-going/Local office Supervisors, Regional Supervisors |

**Objective: Perform gap-analysis of SICtA's IV-E module enhancements**

|                      |   |                        |   |
|----------------------|---|------------------------|---|
| Perform gap-analysis | Perform   | Gap analysis performed | 2015/Buss. Analyst and IV-E staff       |
| Evaluate impact      | Evaluate financial impact and contract amendments | Signed contract        | 2015/IT consultant, Legal and Financial |

Directors

Development and Enhancements developed and ready for Enhancements developed  
implementation implementation 2015/IV-E Director

### *Case Review System*

The 2010 CFSR determined that Puerto Rico was not in substantial conformity with the systemic factor of Case Review System. The 2010 CFSR identified the following concerns:

- Parents are not consistently involved in the development of the case plan.
- Although Puerto Rico has a statutory framework for conducting periodic reviews, 6-month reviews do not occur in every foster care case.
- There is a process in place for conducting permanency hearings; however, most hearings are not held in a timely manner.
- ADFAN is not consistent in filing for TPR in accordance with the provisions of ASFA.
- Findings of the onsite CFSR case review indicate that ASFA requirements for filing TPR were met in 58 percent of applicable cases.
- There is no clearly established process for notifying caregivers about hearings or reviews, and Puerto Rico law allows courts to use their discretion in deciding whether caregivers who have had a child in care for 1 year or longer can be heard in any court proceedings.

ADFAN has been working in collaboration with the Court system to address the Legal aspects of protection and the needs of children and families. Program staff from ADFAN and its Court partners enforced the collaboration and sharing on topics that are critical to safety, permanency and well-being, and to comply until the times frames for the hearings mandated by ASFA.

A Cross-Training was design between the Office of the Courts, Department of Justice and ADFAN. Cross-Training entitled: ***“Childhood and Adolescent Welfare: Integration to Speed Up the Permanence Plans”***, was offered in seven ADFAN regions during the two year PIP period. Participation of all ADFAN caseworkers and lawyers was required. Also, judges and prosecutors were required.

The QA office designed an evaluation form to review results. The evaluation was focused in the compliance with the following requisites: initial and follow up hearings, permanency hearings, TPR, notice to foster and adoptive parents or caregivers. In each regional office a Regional Committee was convene to review the results of the implementation of the strategy.

Weekly the Regional Committee meet to discuss the reports (evaluation forms) of the hearings. Corrective actions are taken in lieu of the findings of the reports. Monthly a central committee revises all regional reports and recommendations and evaluates the implementation of the strategy. Some of the findings are:

- Judges tell caseworkers that they can testify in hearings without submitting a social report.
- Parents do not have legal representation.
- Reports are not submitted in a timely manner.
- Information in the report does not sustain the social recommendations.
- CW's are not using the social report guide provided.
- CW's do not attend hearings, or do not attend adoption hearings.

During FY 2013 a 2014 we accomplished:

- Reunification of 795 minors
- Adoption of 126 minors
- Guardianship for 31 minors
- Other planned living arrangements for 325 minors

PR will continue with the cross training of SW, Judges and Prosecutors in order to improve results and achieve permanency for kids. During the next semester Caguas, Carolina and Humacao Regional Offices will be trained. We will continue with the following strategies:

- Identify the minors who have a reunification plan with a defined timeframe.
- Modify, standardize and update the standards, forms and communications related to the permanence plans.
- Train the SW/FST and the regional and local supervisors regarding the modifications and updates made to the standards and forms related to the permanence plans.
- Monitor the time that minors with a reunification plan spend in Foster Care using the Regional Committee form

As part of the Court Improvement Project, a work group under the leadership of the Court Administration will continue working on how to better document Court and judicial actions, that will address needing improvement identified on the CFSR final report.

ADFAN will improve its coordination activities and efforts with the Puerto Rico CIP program; courts; court personnel and officers; and key internal and external child welfare stakeholders to ensure cases for all children in foster care are reviewed in a timely manner and diligent efforts are made to achieve timely permanency for children. ADFAN will work in partnership with such key stakeholders to identify and address barriers to ensuring timely permanency is achieved for all children in foster care.

### *Quality Assurance System*

#### Assessment of Performance

For the years 2015-2019, the Quality Assurance Office will be continued with the readings for all regional offices. The instrument to be used will be the Child Families Services Review (CFSR) final approved version, is the same that is used by the staff of the Federal level.

Each of the performance items will be evaluated and the corresponding safety, permanency and well-being outcomes will be ratings as: strength, area needing improvement and not applicable, which is consistent with the criteria established in the instrument developed by the federal government.

For the moment we will continue carrying out the on-site review follows:

- Quality Data Collection

The QA Office carries out a very similar process to the one carried out by the federal CFSR. These reviews are scheduled on a quarterly basis, San Juan, as the largest metropolitan region, is reviewed two (2) times per year; the other regions are reviewed once per year.

#### a) Sites

The aim is to collect and extract accurate quantitate and qualitative data, and properly implement it across ADFAN's 10 regions.

Aguadilla  
Arecibo  
Bayamón  
Caguas  
Carolina  
Guayama  
Humacao  
Mayaguez  
Ponce  
San Juan

#### b) Size

Each sample consists of 15 cases per region, providing a total sample for 165 cases per year.

- 60% Foster Care plus over-samples
- 40% In Home plus over-samples

#### c) Universe

- Children in open cases involving at least one report of child abuse and neglect (CPS report).
- The case has been open for services for at least 60 days as of the sample draw date.

- Case management services are provided by agency staff in the regions under review.
- Either:
  - Foster Care: The child has been in a removal episode for a minimum of 8 days.
  - In Home: Neither the target child nor a sibling is in a removal episode.

#### d) Final Sample Confirmation

The lists of cases will be provided to the ADFAN's Regional and Associate Director. Then, the list of cases is randomly ordered and the QA Office chooses and confirms that a child or family meets the criteria for inclusion in the sample, up to the required number of cases.

#### e) Case Elimination Criteria

Puerto Rico will follow the case elimination criteria used in the standard CFSR process. In addition, cases may be eliminated from the final sample if:

- Any of the above inclusion criteria are found to be not true for the case.
- A sibling in earlier order on the list has been included in the final sample.
- In Home only – The identified child or a sibling is in Foster Care for 24 hours or longer at any time priority the review start date.
- San Juan only – the family, or one of its children, was selected and reviewed during the most recent review in San Juan.

#### f) Period Under Review (PUR)

PUR comprises one year prior to the date the case is reviewed to the review date.

#### g) Review Schedule

| Month   | <u>Jan</u>      | <u>Feb</u>       | <u>Mar</u> | <u>Apr</u>   | <u>May</u>     | <u>Jun</u>     | <u>Jul</u>     | <u>Aug</u>      | <u>Sept</u>     | <u>Oct</u>     | <u>Nov</u>    | <u>Dec</u>      |
|---------|-----------------|------------------|------------|--------------|----------------|----------------|----------------|-----------------|-----------------|----------------|---------------|-----------------|
| Site    | <u>San Juan</u> | <u>Aguadilla</u> | -          | <u>Ponce</u> | <u>Guayama</u> | <u>Humacao</u> | <u>Bayamon</u> | <u>San Juan</u> | <u>Carolina</u> | <u>Arecibo</u> | <u>Caguas</u> | <u>Mayaguez</u> |
| # Cases | <u>15</u>       | <u>15</u>        | -          | <u>15</u>    | <u>15</u>      | <u>15</u>      | <u>15</u>      | <u>15</u>       | <u>15</u>       | <u>15</u>      | <u>15</u>     | <u>15</u>       |

#### h) Data

Findings will be recorded and reported quarterly for each region reviewed, including the number of cases reviewed and, for each goal item, the number of cases rated as strength, the number of cases rated as applicable, and the percentage of strength achieved.

i) Instruments

ADFAN's reviews the ten (10) regions with the CFSR In-Site Review instrument consistent with the instructions and consistent across reviewers. The review is a case record review and interview with the caseworker, supervisor, service provider, parent, child, foster parent, stakeholders or site liaison. CFSR instrument (QA-001) & ADFAN Review of record (QA-002).

j) Follow-up

The reports generated through the reading will be submitted to the concerned Regional Office staff. Changes between years of reading to another will display to them for they can observe whether they are positive or negative, so that they can prepare their plans to improve on their particularities. Quarterly reports with findings will be distributed to the Administrator, Deputy Administrator, Assistant Administrators and Regional Offices.

Once completed the reports according to the PIP period, adjustments in the CFSR review with the 2014 version will be of the On Site Review Instrument and Instructions (ORSI), Stakeholder Interview Guide 2014 Instrument, and the CFSR technical bulletin #7. The federal monitoring is schedule for the year 2018. QA will take part in the Organization of Statewide Assessment in preparation for the round 3<sup>th</sup>. So, we will continue reading according to the guidelines established in the previously mentioned documents. In compliance with the memorandum ACYF-CB-IM-12-07 of the Federal level, in the Department of the family are training 5 people in the Academy of the continuous Quality Improvement (CQI). The people involved are as follows; Dr. Ursula Manfredo Plicet, Training and Quality Assurance Office Director. Mrs. Jadeyra Rivera and Mrs. Tania Muñoz, Social Work Supervisor II of the Training Office, Mrs. Yashira Galí Rodríguez, Social Work Supervisor I and Mrs. Enid López Vélez, Social Work IV, both of the Quality Assurance Office.

The CQI Training Academy is classified as a Learning Lab and is a vital resource for the participants including; Staff Office of the Social welfare system and staff of the Academy and faculty. The CQI is a complete process of identify, describe and analyze strengths and problems,

and then to test the implementation of learning through a review of solutions. The Academy is offered between January and August 2014 and incorporates the latest in Group and learning activities to facilitate flexible participation, critical thinking and opportunities for immediate application.

The CQI allows States or territories to measure the quality of the services provided to determine the impact of those services on the families and children who receive them. It also measures the performance and efficiency of the processes and operating systems required by federal law.

Is expected that at the end of the Academy of CQI the ADFAN could constitute a team that includes staff trained at the Academy of the CQI, service providers, children who participate in the program of independent living, and other personnel which using available data, to develop alternatives that can cause changes in the provision of services.

A continuous quality improvement approach allows to measure the quality of the services always determining the impact and the services on results of child and family level and the performance and efficiency of processes and systems in operation in the State of the States or required by Federal law. Technical assistance will be seeking per year for staff that comprise the staff of CQI in the ADFAN, middle management and managerial staff and will be requested 5 spaces for staff of courts (Justice for children).

In-service training will be offered to social work staff of the QA Office (2015-2019), to maintain QA staff up to date, in particular the competencies they must develop and that contributes to enhancing the CQI approach.

ADFAN will be initiated a Continuous Quality Improvement (CQI) approach which will be the practice in the organizational culture of the agency. The categorization of findings into areas needing improvement, strengths as well as feedback from the agency, children, families and stakeholders throughout the evaluation process will be incorporated within ADFAN's QA organizational practice. (Casey Family Programs and National Child Welfare Resource Center for Organizational Improvement May 2005.) With this program is expected to strengthen the system of evaluation and QA in the ADFAN.

The goal is to have a strong administrative CQI approach to oversee the CFSP in a consistent manner. To reach this goal, ADFAN will ensure that: The CQI process will be applied across the ten (10) regions with central level agency oversight and authority over the implementation; a systemic approach will be fine tuning. It establishes written and consistent



CQI standards and requirements for central, regional and local level, and any private agencies with case management responsibilities on behalf of ADFAN. It maintains an approved training curriculum for CQI staff, managerial and middle managing level, including any contractor or stakeholder staff conducting CQI activities. It establishes written policies, procedures and practices for CQI (internal and outsources). It evidences the capacity, credentials, and resources to sustain an ongoing CQI process, including designated CQI staff or contractor staff.

**ADFAN's Quality Assurance Office**  
**State Plan - 2015-2019**

**Goal:** *Offer continuous quality improvement to optimize practice in the provision of services in the administration of families and children (ADFAN) of the Department of the family of Puerto Rico*

| Objective   | Activities   | Time         | Resources   | Evidence of completion  |
|---|--|--------------|---|---|
| 1. Perform periodic review each calendar year of the services offered to children and families across the 10 regions of the ADFAN.  | Establish: Reading by plan phases, Calendar, Methodology, Instruments, Field work & Follow up  | 2015 to 2019 | Personnel Quality Assurance Office                                  | Reports of findings by region and level island wide.<br>Presentation of findings to associated principals, Stakeholders and staff of social work. |
| 2. Revised policies and standards in conjunction with the assistant administrators of programs: Social Protection, Family Preservation and Support Services and Foster Care and Adoption. | Revised that the policies and norms of the ADFAN are in accordance with the ASFA law.  | 2015 to 2019 | QA Staff and Assistant Administrators                               | The rules are in concord to federal requirements and observed an improvement in practice in the provision of services.                            |
| 3. Collaborate on internal evaluations which require assistance of quality assurance in Social protection, Family Preservation and Support Services and Foster Care and Adoption          | Assessments of compliance with the report of maltreatment time frames<br>Share information about data of the Office, such as: list of active cases and cases identified as critical through the review.<br>Evaluations of projects such as: Round Table, Foster Homes & Court Hearings | 2015 to 2019 | Personnel of Quality Assurance Office                               | Reports of findings and recommendations.<br>Presentation of findings and recommendations to the Administration and program.                       |
| 4. Create a team based on the Continuous Quality Improvement (CQI) to address issues related to improving practices in the provision of ADFAN services                                    | Complete the training of the CQI and constitute a CQI work team.   | 2015 al 2019 | Dr. Ursula Manfredo and other personnel whom take the CQI training. | Establishment of the ADFAN CQI team<br><br>Work completed by the team of the CQI in the ADFAN   |

Goal: To have a strong administrative CQI approach to oversee the CFSP in a consistent manner.

| Objective  | Activities  | Time           | Resources             | Evidence of completion   |
|--|---|----------------|-----------------------|--|
| ADFAN will initiate a Continuous Quality Improvement (CQI) approach which will be the practice in the organizational culture of the agency by continuing to Strengthen components of CQI system. | Apply Continuous Quality Improvement System in the organizational culture of the Agency to meet the outcomes for childrens, youth and families in compliance with federal requirements. | 2015           | QA Unit               | a) Workgroup composition including names, titles, affiliation; b) meeting schedule; c) work plans and reports; d) status updates on group work; e) workgroup statement of recommendations; f) status updates on group work |
|  | Data Collection - begin TA discussions with Children's Bureau to identify/refine potential data sources for Systemic Factors  | 2015-2018      | QA, AA's, Data, RO/LO | a. TA work plans and reports.  |
|  | Case Review - Examine new CFSR OSRI for use in QA process   | 2016           | QA, AA's, Data, RO/LO | QA personnel meetings to review the new CFSR OSRI. QA Plan developed for each site. Apply the new CFSR to the QA process.  |
|  | Data and Analysis - reinforce/expand sharing and discussion of QA results with RO/LO/partners   | 2015 & ongoing | QA, AA's, Data, RO/LO | a. Quarterly report of progress on goals, including a summary of successes, challenges or barriers. B-Examples of action plans developed to strengthen specified results   |
|  | Feedback and Adjustment - Reinforce/expand engagement with RO/LO/Partners in improvement planning   | 2015 & ongoing | QA, AA's, Data, RO/LO | Quarterly report of progress on goals, including a summary of successes, challenges or barriers  |

### *Staff and Provider Training*

Even though accordingly with de Final Report CFSR December 2010 *“Puerto Rico is not in substantial conformity with the systemic factor of Staff and Provider Training. The 2010 CFSR determined that ADFAN has developed and implemented a training program for new caseworkers that addresses the skills needed for caseworkers to perform their jobs and that the agency can track participation in training. However, information from the stakeholder interviews indicates that initial training has not been provided over the past 2 years because of a hiring freeze in the agency”* (quote) .

During the years 2010 to 2011, the functions of the training office were assumed by the office of then Secretary of the agency, Atty. Yanitsia Irizarry. From her office were coordinated some training activities, which did not follow the standards of registration, tracking for carrying out the requires contact hours, content and assessment in keeping with the requirements for the CB. As previously reported the Office was dismantled and nor was given participation to the Director in the development of any training activities during this period. This resulted in blankness in offering continuous preparation for the new appointment and ongoing staff training.

For 2012, the Training Office continuing without staff dedicated to these functions. However, to accomplish PIP Dr. Manfredo develops a five days coaching curriculum to train 18 supervisors as trainers. With the support of one of the supervisors of quality assurance, Yashira Gali. On February 27, 2013 Dr. Manfredo provide technical assistance to the members of the Citizens Board for Child Deaths from the agency on Program Evaluation as requested by Mrs. Hilda Rodriguez, Assistant Administrator for Family Preservation and Support Services.

One of the strengths in the training office turns out to be that the Director as well as a master's degree in social work and also, holds a Ph.D. in education which facilitates the development of contents in social work field and know-how in the creation of curriculum, assessment for learning and the use of strategies of professional development of the art in tune with changes in the field of staff development. ADFAN will also support continued staff participation in training offered by stakeholders such as the Courts, Department of Justice, Department of Education and other collaborators.

Information concerning the functioning of the systemic training factor was presented in the program support section and in Detail of activities to the FY 2013 - 2014 please refer to those sections in this document.

*Service Array*

See Assistant Administration for Community and Prevention Services

*Agency Responsiveness to the Community*

See Assistant Administration for Community and Prevention Services

### *Foster and Adoptive Parent Licensing, Recruitment, and Retention*

The 2010 CFSR determined that Puerto Rico was not in substantial conformity with this systemic factor. Puerto Rico complies with Federal requirements for criminal background checks for foster and adoptive parents and is effective in using cross-jurisdictional resources to facilitate adoptive or permanent placements for waiting children.

However, the 2010 CFSR also identified the following concerns:

Although Puerto Rico has standards for foster family homes and childcare institutions, these standards are not consistently implemented nor are standards consistently applied to all family foster homes.

The Statewide Assessment indicates that Puerto Rico needs to focus on the recruitment and retention of foster parents, including assigning ADFAN personnel dedicated to developing activities for the recruitment and retention of foster parents.

ADFAN began a recruitment campaign in August 2013. Based on the needs of the minors under the custody of the Department of the Family, the campaign was geared towards the recruitment of foster and adoptive parents for minors with special needs, minors between the ages of 0 to 5, and minors between 13 to 21 years of age.

The campaign is divided in two parts:

Main campaign- The principal campaign is oriented toward accentuating the benefits of becoming a foster parent for any minor.

The second part, will focus on the specific descriptions by age and special conditions. This campaign will have as its main objective the orientation of the potential foster and/or adoptive parents

| <b><u>Action Step</u></b>  | <b><u>Due date</u></b> | <b><u>Progress</u></b>  |
|--|------------------------|---|
| Development of promotional material, according to the identified priorities, with the advertising company.   | August 2013            | ADFAN and the advertising agency contracted conducted 3 meetings to design the recruitment campaign.  |
| Provide orientation to the units in order to achieve effective communication. We will train the personnel on marketing techniques and effective communication strategies so that the purpose and goals are achieved. | August 2013            | Meeting with the Foster Care Unit Supervisors and Associate Directors to provide orientation was conducted.<br>Staff from the regional offices and the foster care units was coached on how to address the public.      |
| Each regional office will develop their internal procedure to respond to the calls from interested people on becoming foster/adoptive parents.   | August                 | Meetings were conducted to coach regional offices staff about the internal procedure. Emphasis was given to the promotion of children of 0-5 years of age, 12 years and older, special needs and placement of siblings. |
| Identification of success stories among adoptive and foster parents so that they can serve as alternative spokespersons of the campaign.   | August                 | Publication of 4 success stories from adoptive and Foster parents.  |

| <b>Action Step</b>  | <b>Due date</b>            | <b>Progress</b>   |
|---|----------------------------|---|
| Each regional office will develop a calendar of promotional activities to be held in megastores, public government activities and other special events in which the promotional materials could be distributed or the public may receive orientation on the subject for promotional purposes.   | August 2013                | A calendar was developed for each region, including promotional activities, interviews and special events.  |
| Media visits to television channels (channels 2, 4, 11, 6, and 24), radio (WKAQ Radio, 740 AM, Radio Isla), and written press (all the newspapers, press communications, and special reports) for the recruitment campaign opening.   | September 2013- until 2014 | Media tour: 5 radio interviews, 5 TV interviews, 7 newspaper articles, 1 online article.  |
| Promotional materials will be distributed among the TV, press, radio contacted. They will also be distributed among the staff designated to collaborate with the campaign at the regional and local office levels. These visits are directed towards highlighting minor's needs and characteristics, and, thus, the characteristics of the potential foster and adoptive parents that need to be recruited. |                            |   |
| Coordination must exist with the Family Orientation Support Hotline, so that it serves as a liaison in cases where people need information, and they do not want to go to a local office or region. Also, coordination must also be established with ADFAN's website and the Department of the Family Facebook page.  | August- September 2013     | The Family Orientation Support Hotline established a protocol to gather information and provide orientation to the public regarding the Foster Homes and Adoptive parents services. Also, in the Department Facebook page we posted information and the requisites to apply to the program. |
| We will use informative materials, posters and promotional material, radio time, and testimonial from current homes and youths that have exited the system with positive stories.   | September 2013             | Promotional radio commercial and newspaper advertisement were published.  |
| At least, three (3) complete articles about success stories will be published in Facebook, Tweeter and the written press.   | September 2013             | Seven articles were published describing success stories in the newspaper and one was published online.   |

| <u>Action Step</u>  | <u>Due date</u> | <u>Progress</u>  |
|---|-----------------|--|
| Monthly progress reports on the number of foster and adoptive homes oriented and recruited. | Monthly         | <p>Once the mass communication through television, newspaper and radio campaign, billboards and internet are performed in December 2013 and January 2014, 72 calls, these 42 have been the guidance line is received in December 2013 have been referred to the regions (12 Have already been cited for orientation, 2 have filled the request, 1 referred to licensing, 15 have not replied and you will visit, the rest discarded solicitor). There are 30 orientation requests received recently, in January 2014, in the line of orientation and family support which were already concerned with the regions and are in the process of being cited for orientation.</p> <p>August 2013 to December 2013 period 218 requests which were received because they have visited to study 121 (110 of these are certified homes). Starting in August 2013 regional activities for the promotion of recruitment of temporary homes or foster care were initiated.</p> |



## PLAN FOR IMPROVEMENT (D3)

### *Implementation Support with Assistant Administrations*

To comply with the work plans established in Quality Assurance and to continue collaborating with the assistant administrations as required, to carry out internal evaluations, it is recommended that the staff of the Quality Assurance is increased.

Quality Assurance Office at the Central level of the ADFAN plays a crucial role with regard to the process of monitoring that is done at the Agency. Therefore, this Office remains at the Central level of the ADFAN to maintain the objectivity of the process. In addition, the compliance to the commitment made by the Agency with the Federal Government in response to the findings of the monitoring carried out in 2003 and 2010 the mandate of Federal law which requires us to address this matter with urgency and preeminence.

Therefore, in terms of the Area of reading and interviews it is recommended that assigned a total of twelve social workers IV to increase the number of readers and restore two work teams with six readers with master's degree in Social Work under the supervision of two Supervisors in Social Work I, who, in turn, would respond to a Social Work Supervisor II who will work directly with the Director of the Quality Assurance Office. It is essential to have this staff to accelerate the processes of reading records.

Social Work Supervisors II will conduct and work with reports of high complexity and statistical information. They must have experience in evaluation of programs for families and children, some use of SPSS statistics management. In addition, experience training in the use of the CFSR instrument. Among other responsibilities that will have will be the guiding and advising staff of the region on the implementation of the central guidelines, rules, regulations and procedures related to programs and ensure the correct and uniform application. May determine changes, modifications or amendments necessary to meet social changes and needs of the participants according to the analysis of the results found in the respective areas are underway.

In addition, it is important to have a statistical IV, who in coordination with the Office Director, supervise the staff which plans, organizes and executes the management of statistical data, and three employee of clerk in statistics that can help two statistical III regarding data that

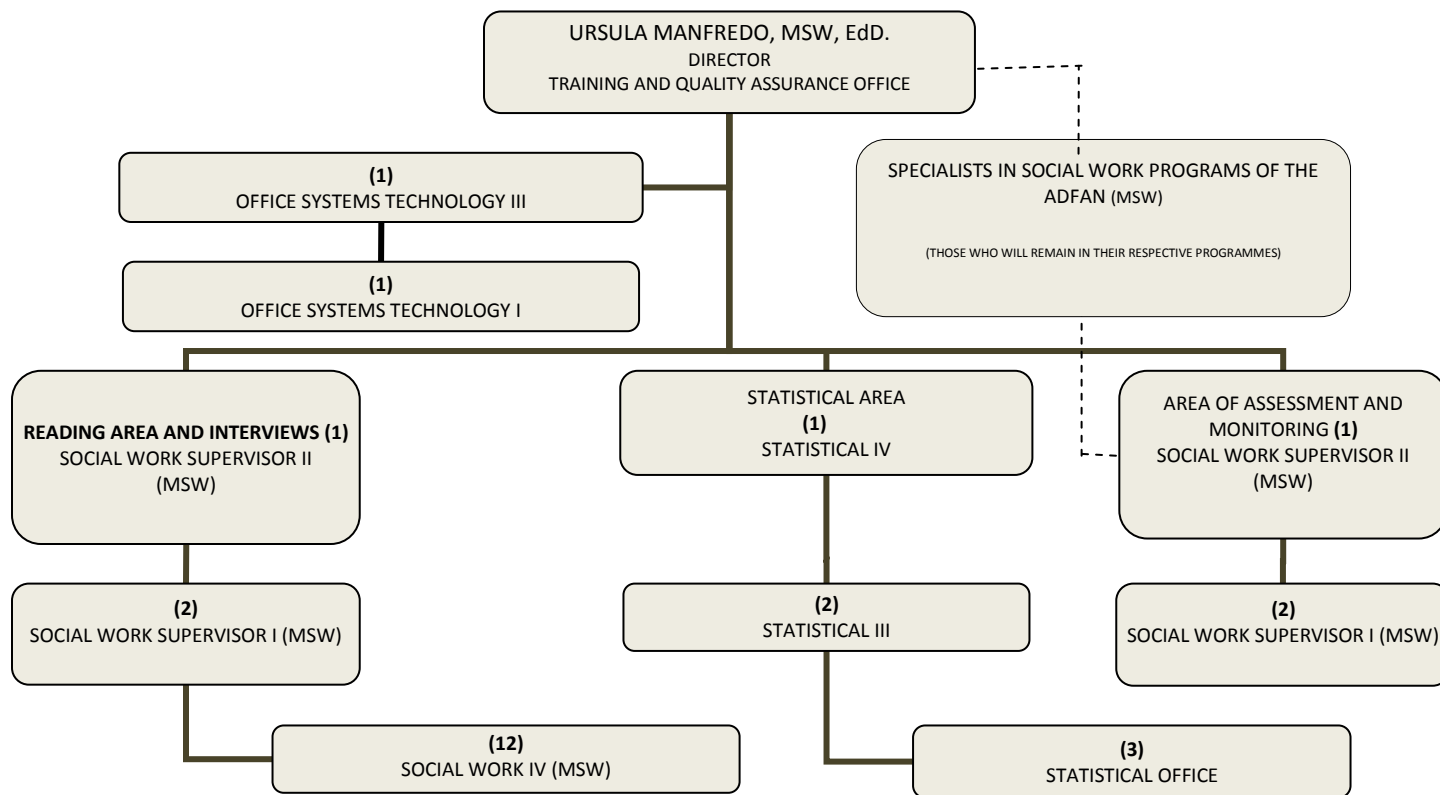
are generated by the SPSS program as part of the process of reading records. This program is used in quality assurance to help to prepare the reporting of findings. Finally, it is necessary to appoint a technique of systems of Office III and a technique of systems of Office I for this Office to collaborate with everything related to reports, correspondence, file and other work that relate to this area. Nowadays the Office of guarantee of quality does not have secretarial staff.

To comply fully with the proposed in this work plan, it is recommended that the Area of monitoring and evaluation develops plans for improvement of the Program Improvement Plan for its acronym in English PIP that make the regions according to the results. In this way can be emphasis to regions so that they can develop and implement these plans in accordance with the findings that emerge from the reading process. To make co-ordinations, assessments and reports relating to systemic factors and Assistant administrations as appropriate.

It is necessary to indicate that personnel assigned in this area is also doing readings, interviews and collaborating with other authorities at the same time that provides tracking so it is imperative to assign staff trained and skilled in the field of social work, to perform these duties of monitoring and evaluation.

We recommend that a Supervisor in Social Work II directed this area, who will work directly with the Quality Assurance Office Director and two Supervisors in Social Work I, who will work with the regions improvement plans. Similarly, evaluations of the systemic factors altogether will work with social work specialists in the programs of the ADFAN, who will remain in their respective areas of program.

Then a proposed diagram is shown, with highlights in the previous paragraphs on how it will be the Quality Assurance Office.



#### *ASSIGNED STUDENTS IN FIELD PRACTICIUM*

During the years 2015 to 2019 the Quality Assurance Office continues as practice center for graduate students in the concentration of administration of the school of Social work for Beatriz Lassalle of the University of Puerto Rico.

The quality assurance office will take part in the process with the systematic and methodological approach, as described in the section of QA and CQI in this report. Also will offer data with results and collaborate with the assistant administrations and ADFAN's regions to monitor the progress of the goals and objectives.

**ADFAN's Quality Assurance Office  
State Plan - 2015-2019**

➤ **Assessments and contributions from the Quality Assurance Office (2015-2019)**

✓ **Participation in the federal monitoring CFSR of 2018**

The Quality Assurance Office staff will be available to participate in the next federal monitoring CFSR to take place in 2018.

✓ **Assessments for the Assistant Administration of Social Protection**

The Quality Assurance Office staff continues assessments with the same methodological practice has been mentioned in QA Final Report 2010-2014, for compliance with time frames, for report of abuse both domestic and institutional abuse. It will continue to collaborate with this Assistant Administration, as required.

✓ **Assessments for the Assistant Administration for the Family Preservation and Support Services**

For this administration, there will be little collaboration, among them:

- ✓ Information about the Office, such as data will be shared: lists of active cases of his administration, to perform assessments and work plans with the Social Work Specialists assigned to the program.
- ✓ Data on critical cases, observations of duplication of cases, among others for knowledge and action that corresponds.

It will continue to collaborate with this Assistant Administration, as required.

✓ **Assessments for the Assistant Administration of Foster Care and Adoption**

The Quality Assurance Office staff will be conducting assessments and collaborating in several areas. Among these:

A. Round Tables

The Quality Assurance Office staff will continue the evaluation of compliance with the strategy of the round tables with the same methodological practice has been mentioned in QA Final Report 2010-2014.

## B. Foster Homes

The Quality Assurance Office staff will continue the evaluation of compliance with the same methodological practice, for temporary homes both licensed as certificates, effective implementation with the same methodological practice has been mentioned in QA Final Report 2010-2014.

## C. Evaluation of the views in the Court for minors in custody be placed with the Agency

The ADFAN works in collaboration with staff of the courts administration and staff of the community where a curriculum was developed to implement a 'cross training' training program for officers who work directly with cases of children in foster care, as lawyers, supervisors and technical and social service workers of the ADFAN family and the judges and attorneys on Affairs of family courts.

Continue the Quality Assurance Office staff as a member of the Central Committee; will collaborate with some of the regions where regional committees are constituted. Monthly Central Committee should meet to discuss these findings and as is has been implanting offered training to observe obtained strengths or areas that needs to be improved. As well actions to improve and strengthen this area. It will continue to collaborate with this Assistant Administration, as required.

### ✓ **Collaboration with the Training Office**

The Quality Assurance Office will continue their cooperation with the Training Office in:

- ✓ Provide the necessary data for the training of need to coordinate to ADFAN direct service staff.
- ✓ Through a special assessment plan, monitor the implementation of the quality circles about the visits planned in local offices where you will provide workshops; using evaluation sheet, the bandstand in SPSS, coding sheet and the dictionary of variables.

### ✓ **Other collaborations with the Administration**

All information generated by the Quality Assurance Office, either through reports or observations of the readings will be directed immediately to the Administration. Furthermore we will continue to collaborate with the Administration, as required in manner to keeping evidence based practices, quality assurance staff makes sure to consult professional literature and established by the policies that govern us from the Children's Bureau.

#### TRAINING OFFICE

**D3. PLAN FOR IMPROVEMENT** (This portion of the report is complemented by the section D10 please refer to it).

**Rationale:** Our agency is aimed at achieving the goals of safety, permanency and wellbeing for children participating in our services, which requires a trained and competent staff to take decisions and actions that require fast and efficient handling of the case.

**Purpose:** Continuing education curriculum, aims to develop skills in the areas of welfare of the minor, according to the program instruction, Log No. ACYF – CB-PI 14-03 for CFSP final report 2010 – 2014 & 2015-2019 CFSP. This curriculum related topics in vertical and horizontal manner with respect to: the goals of safety, permanency and well-being, national standards, and the development of competences in the welfare of the minor.

**Audience:** These trainings are aimed at specialists in social work, associate directors, supervisors, social workers and technical services of family, attorneys and the ADFAN support staff.

**Goal:** Develop strong personnel competencies to achieve substantial systemic change that will turn strengthen the services provides to the children and families of Puerto Rico.

| Objective<br>(CFSR Item 32)   | Action steps  | Program<br>responsible | Evidence<br>Completion/<br>Measures<br>progress | of<br>of | Year<br>Due         | Status<br>update |
|---|---|------------------------|---|----------|---------------------|------------------|
| 1. Develop initial staff training modules geared to offering social workers basic | 1.1. Needs assessment & human resources profile Human (Resources Assistant Administration will provide the total of employees by classification).<br>1.2. Study data from CFSR findings & ADFAN's data profile<br>1.3. Implement policy | Training Office        |   |          | 2015 & Ongoing 2019 |                  |

competencies focused in safety, permanency and well-being of the child and his family, prior to initiating their work.

requirement for initial staff training.

- 1.4. Review & Update the curriculum according with the evidence based practice.
- 1.5. Curriculum Implementation
- 1.6. Training schedule for each region.
- 1.7. Specific training environment “hands to the project” *with in situ* experience with a coach supervisor, utilizing protocols, formats, and applying the services needed by children and their families.

Reviewed curriculum each FY

Attendance reports for initial staff training and summary of report on compliance with training requirement. Establish a local office model for concrete transfer of learning to the workplace. FY 2015

| Objective<br>(CFSR Item 33)  | Action steps   | Program<br>responsible | Evidence of<br>Completion/<br>Measures of<br>progress | Year Due | Status<br>update |
|--|--|------------------------|---|----------|------------------|
| 2. Develop ongoing staff training modules geared to offering social workers, supervisors and staff, continuum competencies focused in safety, permanency and well-being of the child and his family. | <p>2.1. Needs assessment &amp; human resources profile Human (Resources Assistant Administration will provide the total of employees by classification).</p> <p>2.2. Study data from CFSR findings &amp; ADFAN's data profile</p> <p>2.3. Review &amp; Update the curriculum according with the evidence based practice.</p> <p>2.4. Curriculum Implementation</p> <p>2.5. Training schedule for each region</p> <p>2.6. Specific training environment "hands to the project" experiences with a coach supervisor, utilizing protocols, formats, and applying practice behaviors services needed by children and their families.</p> <p>Utilizing CFSR ADFAN's findings to develop an accurate curriculum with active learning practice combined with interactive tech skills.</p> | Training Office        | 2015 & ongoing 2019                                   |          |                  |



| Objective<br>(Systemic factor No. 4) | Action steps  | Program responsible           | Year Due   | Status update  |
|--------------------------------------|---|-------------------------------|--|----------------|
| 3. a                                 | 3.1. Needs assessment   | Training Office & Foster Care |  | 2015 & ongoing |
|                                      | 3.2. Study data from CFSR findings & Foster Care's data profile                 | Assistant Administration      |  | 2019           |
|                                      | 3.3. Implement policy requirement for foster and adoptive parents training.     |                               |  |                |
|                                      | 3.4. Review & Update the curriculum according with the evidence based practice. |                               | Reviewed curriculum each FY  |                |
|                                      | 3.5. Curriculum Implementation  |                               | Attendance reports for training and summary of report on compliance with training requirement. |                |
|                                      | 3.6. Training schedule for each region  |                               |  |                |

| Objective<br>(Systemic factor No. 4)   | Action steps                           | Program responsible            | Evidence of Completion/ Measures of progress   | Year Due       | Status update |
|--|--|--------------------------------|--|----------------|---------------|
| 4. Provide to lawyers and support personnel training content that addresses the skills and knowledge base needed to carry out their duties, in child welfare system. | 4.1. Needs assessment                  | Training Office & Legal Office | Reviewed curriculum each FY  | 2015 & ongoing |               |
|  | 4.2. Study data from CFSR findings     |                                | Attendance reports for training and summary of report on compliance with training requirement. | 2019           |               |
|  | 4.3. Curriculum Implementation         |                                |  |                |               |
|  | 4.4. Training schedule for each region |                                |  |                |               |

Through study and literature review, is expected to direct efforts to establish training in the field of Trauma and Mental Health of Children and Adolescents. This curriculum also aims to bring the concept of evidence-based practice. It is considering the following literature:

- Bauermeister, J., Shrout, P., Ramírez, R., Bravo, M., Alegría, M., Martínez- Taboas, A.,... Canino, G. (2007). ADHD Correlates, Comorbidity, and Impairment in Community and Treated Samples of Children and Adolescents. *Journal of Abnormal Child Psychology*. 35: 883- 898.
- Birch, M. (Ed.). (2008). *Finding Hope in Despair*. Danvers, MA: Zero to Three.
- Blaustein, M. &Kinniburgh, K. (2010). *Treating Traumatic Stress in Children and Adolescents: How to foster Resilience through Attachment, Self- Regulation and Competency*. New York, NY: The Guilford Press.
- Osofsky, Joy D. (Ed.). (2011). *Clinical work with traumatized Young children*. New York, NY: The Guilford Press.
- Shirilla, J. &Weatherson, D. (Eds.). (2002). *Case studies in Infant Mental Health: Risk, Resiliency and Relationships*. Danvers, MA: Zero to Three.

## ASSISTANT ADMINISTRATION FOR PREVENTION AND COMMUNITY SERVICES 2015-2019

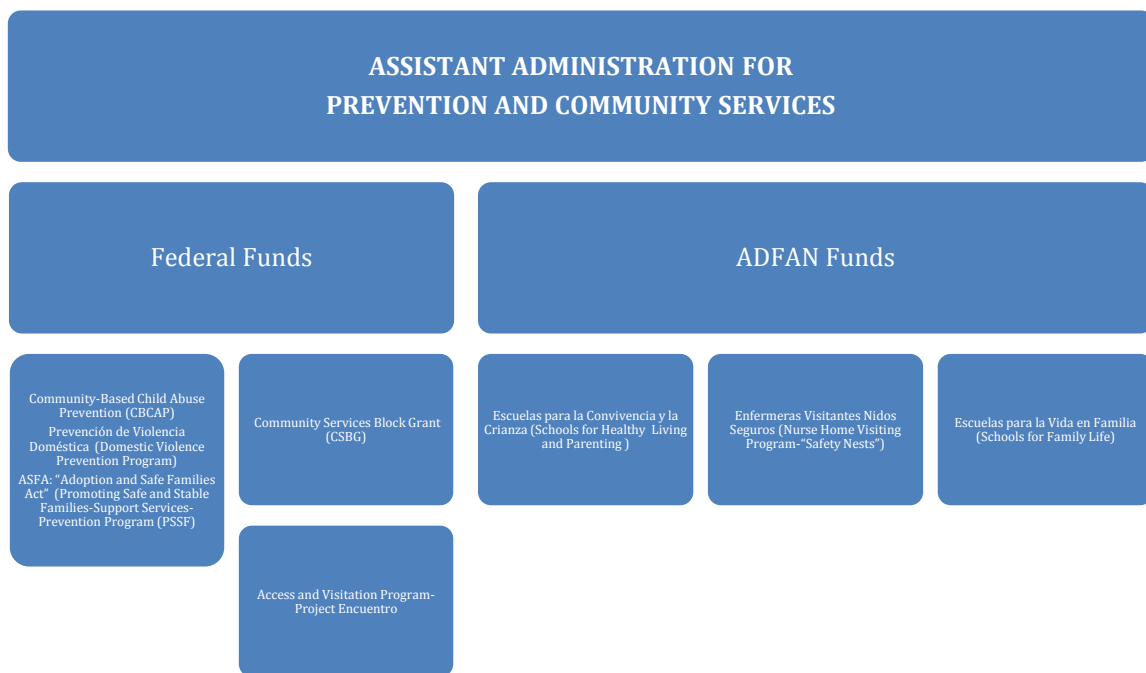
### Vision

Strengthening individuals, families and communities, prevention of family violence and promoting a culture of peace in the families and their communities.

### Description

The Assistant Administration for Prevention in the Community Services is responsible for all the prevention and community services programs. The Assistant Administration establishes and implements primary, secondary and limited tertiary prevention services in communities throughout Puerto Rico. It provides the following programs:

- Schools for Healthy Living and Parenting (Escuelas para la Convivencia y la Crianza)
- Schools for Family Life (Escuelas para la Vida en Familia)
- Access and Visitation Program-Project Encuentro (Proyecto Encuentro)
- Nurse Home Visiting Program-“Safety Nests”
- Community-Based Child Abuse Prevention Program (CBCAP)
- Domestic Violence Prevention Program
- Promoting Safe and Stable Families-Support Services-Prevention Program (PSSF)
- Community Services Block Grant (CSBG)



### Collaboration

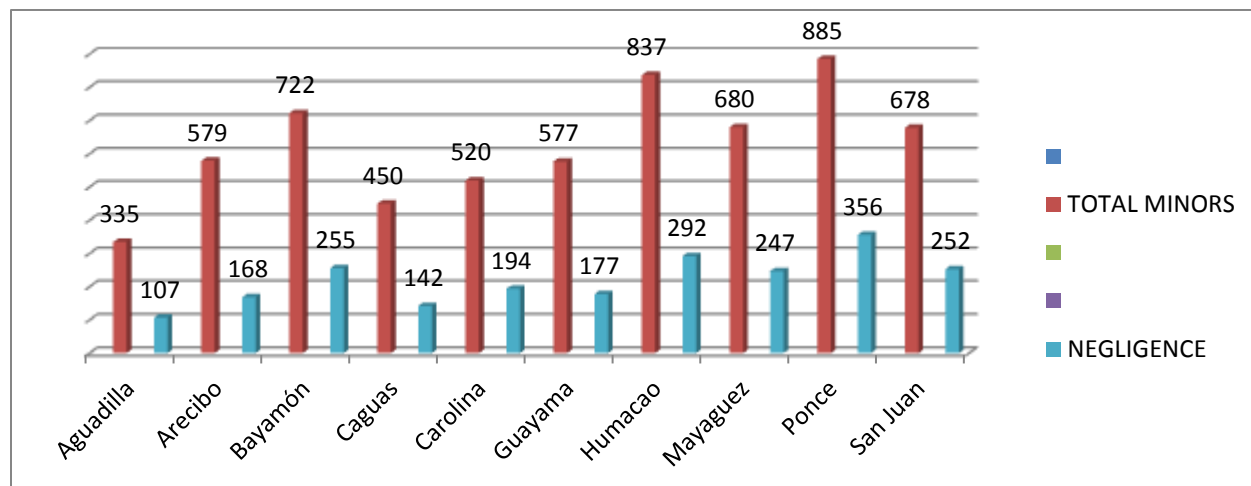
The Assistant Administration for Prevention in the Community Services will maintain the formal agreements established with the Department of Health in the Administration for Services for Mental Health and Addiction in the participation in the Advisory Council on Prevention “Strategic Prevention Framework State Incentive Grant”. We are incorporating their framework in the implementation of a strategic plan for the prevention of child maltreatment. We will continue representing the Agency in the interagency working committee against human trafficking in Puerto Rico and working in close collaboration. In the Department of Health we will maintain our participation in the Advisory Committee in the Project Healthy Families Puerto Rico and United for Early Childhood. During 2013, ADFAN obtained a number of collaborative agreements with the municipalities, agency departments and community based organizations to expand the array of services. We will establish coordination for the provision of the services. The State Domestic Coalition of Puerto Rico, Office of Women Affairs, will continue working and participating in the meetings hosted by ADFAN (Administration of Families and Children) with FVPSA recipients. The Coalition is an important stakeholder in the process of developing the program work plan with ADFAN and the entities that receive funds for domestic violence prevention. The Director of the Program for the Prevention of Domestic Violence (State FVPSA Agency), ADFAN, will meet the Coalition’s General Coordinator, monthly to discuss and share the needs of the entities that provide support services and shelter to victims of domestic violence.

### Service Array

In a survey of needs assessment the Assistant Administrations in the Administration of Children and Families identified the following needs of their clientele: youth with behavioral problems especially in the regions of Bayamón (609), San Juan (625), Caguas (328) and Carolina (366) during 2010 to 2013, psychological evaluation, psychotherapy, parenting skills for adolescents and pregnancy prevention. In a report about the number of Families and Children’s victims of abuse and neglect the Assistant Secretary for Planning and Information System of the Department of the Family informed that from July 2011 to June 2012 a total of 13,913 families and 30,194 minors were under the Protection Services. The typologies of maltreatment and by regions are the following:

| Regional Office | Minors | Typology Cases |              |              |          |           |       |
|-----------------|--------|----------------|--------------|--------------|----------|-----------|-------|
|                 |        | Negligence     | Sexual Abuse | Exploitation | Physical | Emotional | Other |
| Aguadilla       | 335    | 107            | 9            | 0            | 34       | 61        | 3     |
| Arecibo         | 579    | 168            | 20           | 0            | 65       | 138       | 6     |
| Bayamón         | 722    | 255            | 8            | 2            | 38       | 102       | 11    |
| Caguas          | 450    | 142            | 16           | 0            | 51       | 104       | 8     |
| Carolina        | 520    | 194            | 16           | 0            | 55       | 76        | 32    |
| Guayama         | 577    | 177            | 6            | 0            | 32       | 159       | 0     |
| Humacao         | 837    | 292            | 16           | 0            | 91       | 166       | 11    |
| Mayaguez        | 680    | 247            | 10           | 0            | 51       | 152       | 6     |

|               |             |             |            |          |            |             |            |
|---------------|-------------|-------------|------------|----------|------------|-------------|------------|
| Ponce         | 885         | 356         | 18         | 0        | 69         | 162         | 25         |
| San Juan      | 678         | 252         | 11         | 0        | 75         | 109         | 7          |
| TEST          | 6           | 3           | 0          | 0        | 0          | 3           | 0          |
| <b>TOTALS</b> | <b>6269</b> | <b>2193</b> | <b>130</b> | <b>2</b> | <b>561</b> | <b>1232</b> | <b>109</b> |



The Assistant Administration for Child Protection informs the following tendency for fiscal year 2012-2013.

| Region    | Municipality  | Typologies                        |
|-----------|---------------|-----------------------------------|
| Aguadilla | Aguadilla     | Negligence/emotional maltreatment |
|           | San Sebastián | Negligence                        |
|           | Isabela       | Emotional maltreatment            |
| Arecibo   |               | Negligence/emotional maltreatment |
|           | Manatí        | Negligence/emotional maltreatment |
| Bayamón   | Bayamón       | Negligence/emotional maltreatment |
|           | Toa Baja      | Negligence/emotional maltreatment |
| Caguas    | Caguas        | Negligence/emotional maltreatment |
|           | Barranquitas  | Negligence                        |
|           | Gurabo        | Negligence                        |
| Carolina  | Carolina      | Negligence/emotional maltreatment |
|           | Trujillo Alto | Negligence/emotional maltreatment |
| Guayama   | Guayama       | Negligence/emotional maltreatment |
|           | Cayey         | Negligence/emotional maltreatment |
| Humacao   | Humacao       | Negligence/emotional maltreatment |
|           | Fajardo       | Negligence                        |
|           | Juncos        | Emotional maltreatment            |
| Region    | Municipality  | Typologies                        |
| Mayaguez  | Mayaguez      | Physical maltreatment/negligence  |
|           | Cabo Rojo     | Physical maltreatment             |

|          |               |  |
|----------|---------------|--|
|          | Sabana Grande | Negligence                                   |
| Ponce    | Ponce         | Physical maltreatment/emotional maltreatment |
|          | Aibonito      | Physical maltreatment                        |
|          | Juana Díaz    | Emotional maltreatment                       |
|          | Coamo         | Negligence                                   |
|          | Peñuelas      | Negligence                                   |
| San Juan | San Juan      | Negligence/emotional maltreatment            |

In report about the number of Families and Children's victims of abuse and neglect the Auxiliary Administration of Protection, Preservation and Family Strengthening informed the incidence of negligence, negligence and emotional maltreatment and physical maltreatment at June 2013 was the following:

June 2013

| Region    | Negligence | Negligence and Emotional Maltreatment | Physical Maltreatment |
|-----------|------------|---------------------------------------|-----------------------|
| Aguadilla | 984        | 619                                   | 144                   |
| Arecibo   | 1571       | 829                                   | 237                   |
| Bayamón   | 2725       | 1736                                  | 395                   |
| Caguas    | 1526       | 926                                   | 254                   |
| Carolina  | 1458       | 1151                                  | 258                   |
| Guayama   | 770        | 440                                   | 125                   |
| Humacao   | 1357       | 783                                   | 208                   |
| Mayagüez  | 1279       | 768                                   | 190                   |
| Ponce     | 2089       | 1096                                  | 266                   |
| San Juan  | 2187       | 1594                                  | 363                   |

The Data Book 2013 a report from the Annie E. Casey Foundation "Kids Counts" informs that in Puerto Rico in 2011 the **Economic Well Being Indicators** were: Children in poverty 57% (499,000); Children whose parents lack secure employment 55% (479,000); Children living in households with a high housing cost burden 33% ((291); Teens not in school and not working 16% ((36,000). **Education Indicators:** Children not attending preschool (years 2009-11) 47% (41,000); high school students not graduating on time (years 2009/10) 40% (16,896. **Health Indicators:** Low-birth-weight babies (year 2010) 12.6% (5,304); children without health insurance (year 2011) 4% (34,000); children and teens deaths per 100,000 (year 2010) 25% ((247). **Family and Community Indicators:** children in single parent families (year 2011) 57% (479); children in families where the household head lacks a high school diploma (year 2011) 19% (170); children living in high poverty areas (years 2007-11) (776,000); teen births per 1,000 (year 2010) 51% (7,170).

The "Report about Incidents of Domestic Violence, by Crimes Committed", 2012, submitted by the Statistical Division of the Police of Puerto Rico offers this data:

- ❖ 11,352 (2012) incidents of domestic violence were registered.

- ❖ The greatest incidence of domestic violence is concentrated in the following geographical areas:

| <b>Urban</b> | <b>Incidents 2012</b> |
|--------------|-----------------------|
| San Juan     | 927                   |
| Arecibo      | 1,209                 |
| Bayamón      | 1,801                 |
| Humacao      | 498                   |
| Carolina     | 810                   |
| Ponce        | 609                   |
| Caguas       | 1,114                 |
| <b>Total</b> | <b>6,968</b>          |

| <b>Rural</b> | <b>Incidents 2012</b> |
|--------------|-----------------------|
| Aguadilla    | 598                   |
| Mayagüez     | 656                   |
| Aibonito     | 634                   |
| Fajardo      | 506                   |
| Guayama      | 508                   |
| Utuado       | 361                   |
| <b>Total</b> | <b>3,263</b>          |

- ❖ Incidents of domestic violence by place and zone year 2012:
- 10,218 of the incidents were at the victim's residence; 9,810 incidents were in the urban zone and 5,474 rural zone.
  - Protection Orders by Regions 2013:

| <b>Regions</b> | <b>2013</b>  |
|----------------|--------------|
| Aibonito       | 293          |
| Aguadilla      | 345          |
| Arecibo        | 1,140        |
| Bayamón        | 2,474        |
| Caguas         | 689          |
| Carolina       | 756          |
| <b>TOTAL</b>   | <b>5,697</b> |
| <b>Regions</b> | <b>2013</b>  |
| Guayama        | 579          |
| Humacao        | 720          |
| Mayagüez       | 800          |
| <b>Regions</b> | <b>2013</b>  |
| Ponce          | 1,374        |
| San Juan       | 750          |

|              |              |
|--------------|--------------|
| Utado        | 620          |
| Fajardo      | 345          |
| <b>TOTAL</b> | <b>5,188</b> |

## c) Incidence of Domestic Violence in Puerto Rico 2013.

|               |             |
|---------------|-------------|
| <b>Deaths</b> | <b>2013</b> |
|               | 9 women     |

Numerous studies have demonstrates the correlation of poverty as a risk factor for child maltreatment. The overall poverty rate in Puerto Rico is estimated to be approximately 45%, and the child poverty rate 58%. Puerto Rico's poverty rates more than double the poverty rates of Mississippi (19.9%), Louisiana (19.6%) or Washington, D.C. (20.2%) which are the highest in the United States. Poverty and inequality in Puerto Rico permeates all aspects of life: among others we can mention quality of education, jobs, medical services and vulnerability to violence. Inequality is mirrored in a variation across populations in inadequacy of prenatal care, birth weight and infant mortality rates. Inadequate prenatal care in Puerto Rico is more frequent among adolescents, unwed and highly parity mothers as well as among those of the lowest socio-economic strata. These groups have the highest proportion of low birth weight babies, higher cesarean rates than their counterparts and their offspring the highest mortality rates.

The mission of the Community Services Block Grant Program (CSBG) is to promote the self-sufficiency and the quality of life in poor communities of Puerto Rico through a network of community action agencies, community-based organizations and municipalities and by coordinating with State agencies. In the needs assessment realized by the delegate Agencies of this program thy found the following. ASPRI: Disengagement of the educational system in relation to the communities; disengagement of the governmental system with the community issues; lack of leadership in the citizenship; lack of citizenship consciousness in relation to the problems of the island and a tendency toward individuality. INSEC: High poverty level; low levels of education and high levels of schools dropout; high levels of unemployment; problems on drugs and alcohol abuse; violence; physical and mental health problems; lack of financial responsibility; poor access to public services; single female household; tendency of increasing elder population; children's and woman abuse; housing needs and homeless. In the municipality of San Juan in regard to citizen participation: low levels of community organization and social cohesion; lack of knowledge about services available in their communities; low levels of community engagement and social capital; lack of trust in government institutions; lack of opportunities and resources for effective citizen participation. In regard to health: lack of access to mental health services; concerns over drug abuse and teen pregnancy; lack of integrated and preventive health services for the population; need for accessible and affordable health care services and facilities for low income people. In regard to education: lack of supervised after-school activities for young people; lack of child care services for working parents; lack of access to electronic libraries; high-school dropout rate, limited alternatives to complete high school , obtain a GED, high school diploma or equivalents; need for literacy and English classes. In regard to employment and unemployment: it is estimated that 16% of the San Juan residents



over 16 years old are unemployed; it is estimated that 25.9% of parents with children under 6 years of age are unemployed; unemployment is identified as a main social problem; need for vocational and business management courses; promotion of local small businesses and community enterprises; need for job-seeking skills and employment competencies. In regard to Public Health and Safety: high incidence of domestic violence; child and elderly abuse; violence and delinquency. In regard to Housing: lack of affordable housing options; special concerns of the elderly and other vulnerable populations; problematic abandoned buildings in the communities. In regard to Homeless: the majority of the communities define homelessness as a problem that affects their quality of life. In regard to Immigrants: issues reported by immigrants and specifically the Dominican populations such as discrimination, civil rights violations, lack of services such as education, health, housing and employment. In regard to People living with disabilities: the 20.9% (82,810 persons) of the population are persons living with disabilities. In regard to Senior citizens: 23% of the population are senior citizens.

The Assistant Administration for Prevention and Community Services administers the following programs: the Schools for Healthy Living and Parenting Program (Escuelas para la Convivencia y la Crianza) (primary and secondary prevention), the Schools for Family Life Program (Escuelas para la Vida en Familia) (tertiary prevention program), Nurse Home Visiting Program-“Safety Nests” Program (Enfermeras Visitantes Nidos Seguros), Access and Visitation Program-Project Encuentro (Proyecto Encuentro), Community-Based Child Abuse Prevention, 20% of the Promoting Safe and Stable Families funds (Family Support and Prevention Programs), the Family Violence Prevention and Services Program (FVPS), and Community-Services Block Grant Program (CSBG). A wide array of programs is provided, including programs addressing inequality and poverty, programs for victims of domestic violence (shelters and support services), and statewide parenting programs (primary, secondary and tertiary prevention).

The Schools for Healthy Living and Parenting Program a primary and secondary prevention program is undertaking numerous strategies to increase awareness about family violence and to promote a message of peace. The Schools for Healthy Living and Parenting provides primary prevention services directed to Puerto Rico’s adults, adolescents and children to promote a culture of peace, non-violent family and community relations, positive parenting skills, management of sexuality in youth, prevention of child abuse in children, and leadership development in community residents. Personnel from numerous non-profit, faith-based organizations and government agencies and their clients have received the School’s services. The train-the-trainer module for the “Working Towards Family Peace” workshops has been developed and is being used to train-trainers from state agencies, faith-based organizations and community-based organizations. It outreaches communities with risk factors and implement various strategies to reduce the risk factors and increase the protective factors both of individual, families and the neighborhood. The School for Family Life Program a tertiary prevention program, is directed at parents whose children are receiving in-home protection services or have been placed in foster care and the plan of permanency includes the return to the home. The parents receive a total of 16 workshops that include: child development, promoting a healthy childhood, parent-child relationship, stress and anger management, and other topics related to child abuse/neglect prevention as part of the Program. The Nurse Home

Visiting Program-“Safety Nest” serves pregnant high-risk adolescents, is a service priority that, since March 2008, appears to emerge as a promising practice. Puerto Rico has one of the highest rates of premature births in the world. During FY 2014-2015, the Nurse Home Visiting Program, Family Nests (Nidos Seguros) currently in Humacao and Mayagüez regions, will expand and strengthen their program by expanding their services. In 2015-2019 the program will expand to the San Juan region. The 3 regions will serve a total of 21 municipalities. The project has achieved concrete results in the following areas: improved health conditions of pregnant youths due to the acquisition of healthy self-care habits, increases in the birth weight of newborns that meet the standards established by the Department of health, infants developing appropriately, according to the age and gender. The participants increased knowledge, acceptance and use of community resources evidences changes in conduct that are directly related to the strengthening of these parent’s protective capacities. Decisions about choosing to breast feed, natural child birth, and resuming their academic interests are also indicators of increased resiliency of these participants. This project is an example of successful community collaboration between ADFAN and the Department of Health. This project is located in two municipalities with a high incidence of pregnant youths and with poor accessibility to services. As a promising practice, the project needs to continue expanding, so that services are offered island wide. Access and Visitation Program-Project Encuentro (Proyecto Encuentro) is a proposal from ASUME (Administration for Minors Sustenance) which delegates funds to ADFAN (Administration for Children and Families) to offer the services. It facilitates the enhancement of parent-child relationship through access and visitations for the non- custodial parent set in a neutral environment in families dealing with violent or dangerous situations needing a protection order. It receives clientele referred from the Commission Women’s Affairs, and the Justice Department in conjunction with the Court System.

The Community-Based Child Abuse Prevention Program funds are used in Puerto Rico to improve children, youth, and women’s wellbeing, with emphasis on the prevention of child abuse, and to better strengthen and support families by increasing protective factors and reducing the risk factors. The Promoting Safe and Stable Families funds (Family Support and Prevention Programs delegate funds to non-profit organizations and municipalities for the provision of a variety of services to prevent child maltreatment and the promotion the security and stability of children and families in a primary prevention basis. For example: workshops, counseling, educational/recreational and cultural activities, tutoring services. The Family Violence Prevention and Services Program (FVPS) delegate funds to non-profit organizations and municipalities for the promotion of programs and services in order to prevent domestic violence, enhance la quality of life of the women and their children and reduce the incidence of deaths by domestic violence. It also promotes the community education for the prevention of this problem. The Community-Services Block Grant Program (CSBG) promotes the self-sufficiency and the quality of life in the poor communities of Puerto Rico through a network of community action agencies, community-based organizations and municipalities and by coordinating with State agencies. Ninety percent (90%) of the CSBG funds are distributed to the four (4) Eligible Entities according to an award formula. Five percent (5%) Discretionary Funds are used by a competitive process of request of proposal. The remaining five percent (5%) is used for administrative expenses. In Puerto Rico four (4) Eligible Entities receive CSBG funds:

Acción Social de Puerto Rico, Inc. (ASPRI); Instituto Socio Económico Comunitario, Inc. (INSEC); Municipality of San Juan; and Municipality of Bayamón. Two of the eligible entities are private, not-for-profit corporations, and the other two entities are local government agencies. The CSBG network provides services in all 78 Municipalities of Puerto Rico. The entities provide services that lead to self-sufficiency; provide employment, education, after school tutoring, nutrition, community involvement, health services and emergency services to low-income and vulnerable populations. For **the period FY2015-2019** its goals are **to improve opportunities for families and individuals to develop skills for daily living**, through **education**, job training, tutoring, sports, arts and **recreational activities attended through** a network of community action agencies, community-based organizations and municipalities and by coordinating with State agencies.

### **Agency Responsiveness to the Community**

The Department of the Family, together with the Multi-Sector Coordination Board began in October 2006, the process of developing a National Child Abuse Prevention Plan to guide prevention efforts in Puerto Rico. The model used to develop this plan, is the one recommended by the World Health Organization. Members of different organizations, agencies, and sectors were invited to participate in the process. Four committees were established: Research Committee, Primary Prevention Committee, Services Committee, and Communications Committee. The recommendations from these four committees were presented to the public as the draft of the plan. The Assistant Administration for Prevention and Community Services was responsible for the Primary Prevention Committee. The main recommendations from this committee centered on evidenced-based strategies to prevent child abuse and program evaluation. As part of the current public policy this plan will be our frame of reference for the planning and delivery of the prevention services and programs. The plan is undergoing revision by the newly formed "Evaluation & Results Committee of the Tran Sectorial Board".

As part of the strategic plan the Agency continues with the services provided by the Nurse Home Visiting Services (Family Nest) and the Schools for Healthy Living and Parenting for the prevention of violence and child abuse and neglect. These services have also been incorporated into the new emblematic project of the Department of the Family "Redes de Apoyo Familiar y Convivencia Comunitaria" (Networks for Family Support and Community Living). Its main purpose is to promote the integral wellbeing of the family in communities in high risk communities, strengthening the maternal and paternal bonds, social bonds and socio-economic development. As part of this Project, The Department of the Family will assign a multidisciplinary team to selected communities to provide, in coordination with diverse entities and agencies, services that promote protection factors. The strategies include the following: orientation of the families on healthy living, child rearing skills, etc.; support, in collaboration with non-governmental entities, the socioeconomic development of the families and their communities; visits to the home by nurses and health professionals. These strategies will be measured through a system of effective indicators in the short, medium, and long run, to collect data from different sectors throughout the Island. The Assistant Administration will

continue to seek and support internal partnerships that promote the expansion of services, as well as the elimination of existing barriers, to increase access to community services. The efforts will target the community at large as well as high risk populations and interest groups. Through these collaborative strategies, ADFAN has the capacity of reaching a broader group of people, especially vulnerable and at-risk populations and areas with high-incidence of child abuse and neglect. These efforts will contribute to expand the continuum of services available in PR to at risk families focused in preventing child abuse and neglect; to strengthen parenting skills; to prevent teen pregnancies in adolescents and to include and or strengthen and support programs that promote activities that will increase the protective factors and reduce primary risk factors, and increase strengthening and the stability of families, thus providing an environment of safety and wellbeing of children, families and communities.

The Agency has begun to study a community-based model of services delivery that guides the collaborations, the provision and contract of community providers and concerned citizens. The strategy that has been considered is the development of an alternative response system for child protection in Puerto Rico, in collaboration with the Social Protection and Family Preservation Assistant Administration. The consideration of this initiative responds to the need of disposing CPS referrals in a more agile way and to provide families in need, with services in a diligent manner. The Assistant Administration for Prevention and Community Services will continue to strengthen the relationship between ADFAN's local offices and the community-based organizations that receive funds through the Assistant Administration for Prevention and Community Services. We will continue to tailor prevention efforts to the needs identified at the regional and local level, and will continue to work towards improving communication among local and regional offices and community-based organizations.

This Assistant Administration will continue to prepare yearly the Prevention and Community Services Directory containing information of all the programs, funded organizations and collaborative agreements available for the provision of a variety of services to prevent family violence. The names of the organizations, contact information, municipalities/regions served, target populations, and a brief description of the services offered are included. This Directory is sent to all Assistant Administrations at the central, regional and local levels. Copies are also made available to other organizations and agencies.

We will continue to include in sub-grantees contracts the clause establishing that priority shall be given to ADFAN's referrals, and that ADFAN could require sub-grantees to establish coordination and/or collaboration with local offices. The Assistant Administrator for Community Services will continue to collaborate in public awareness campaigns, sharing statistical data/services, Service Directories/information brochures, and the development of innovative violence prevention programs. We will continue coordinating primary child abuse prevention initiatives with the Department of Education, the Health Department, Head Start and Early Head Start programs, the Governor's Office, municipalities and with numerous faith-based and community-based organizations.

**Performance**

| <b>Row #</b> | <b>Goal or Obj Ref</b> | <b>Goal</b>   | <b>Objective</b>  | <b>Action Steps</b>   | <b>Program Responsible</b>            | <b>Evidence of completion (Measures of Progress)</b>  | <b>Due Date</b> |
|--------------|------------------------|---|---|---|---------------------------------------|---|-----------------|
| <b>1</b>     | <b>A</b>               | <b>Goal:</b> Offer continuous quality improvement to optimize practice in the provision of services in the administration of families and children (ADFAN) of the Department of the family of Puerto Rico (pg 40) |   |   | QA Unit                               |   |                 |
| <b>2</b>     |                        |   | 1. Perform periodic review each calendar year of the services offered to children and families across the 10 regions of the ADFAN.  | Establish: Reading by plan phases, Calendar, Methodology, Instruments, Field work & Follow up | Personnel of Quality Assurance Office | Reports of findings by region and level island wide.<br>Presentation of findings to associated principals, Stakeholders and staff of social work. | 2015-2019       |
| <b>3</b>     |                        |   | 2. Revised policies and standards in conjunction with the assistant administrators of programs: Social Protection, Family Preservation and Support Services and Foster Care and Adoption. | Revised that the policies and norms of the ADFAN are in accordance with the ASFA law.         | QA Staff and Assistant Administrators | The rules are in concord to federal requirements and observed an improvement in practice in the provision of services.                            | 2015-2019       |

|   |   |  |  |  |   |  |           |
|---|---|--|--|--|---|--|-----------|
| 4 |   |  | 3. Collaborate on internal evaluations which require assistance of quality assurance in Social protection, Family Preservation and Support Services and Foster Care and Adoption                 | Assessments of compliance with the report of maltreatment time frames<br>Share information about data of the Office, such as: list of active cases and cases identified as critical through the review.<br>Evaluations of projects such as: Round Table, Foster Homes & Court Hearings | Personnel of Quality Assurance Office                               | Reports of findings and recommendations.<br>Presentation of findings and recommendations to the Administration and program.  | 2015-2019 |
| 5 |   |  | 4. Create a team based on the Continuous Quality Improvement (CQI) to address issues related to improving practices in the provision of ADFAN services   | Complete the training of the CQI and constitute a CQI work team.   | Dr. Ursula Manfredo and other personnel whom take the CQI training. | Establishment of the ADFAN CQI team<br>Work completed by the team of the CQI in the ADFAN  | 2015-2019 |
| 6 | B | To have a strong administrative CQI approach to oversee the CFSP in a consistent manner. | ADFAN will initiate a Continuous Quality Improvement (CQI) approach which will be the practice in the organizational culture of the agency by continuing to Strengthen components of CQI system. | Apply Continuous Quality Improvement System in the organizational culture of the Agency to meet the outcomes for childrens, youth and families in compliance with federal requirements.  | QA Unit   | a) Workgroup composition including names, titles, affiliation; b) meeting schedule; c) work plans and reports; d) status updates on group work; e) workgroup statement of recommendations; f) status updates on group work | 2015      |
| 7 |   |  |  | Data Collection - begin TA discussions with Children's Bureau to identify/refine potential data sources for Systemic Factors   | QA, AA's, Data, RO/LO   | a. TA work plans and reports.  | 2015-2018 |
| 8 |   |  |  | Case Review - Examine new CFSR OSRI for use in QA process  | QA, AA's, Data, RO/LO   | QA personnel meetings to review the new CFSR OSRI. QA Plan developed for each site. Apply the new CFSR to the QA process.  | 2016      |

|    |   |  |  |   |                       |   |                        |
|----|---|--|--|---|-----------------------|---|------------------------|
| 9  |   |  |  | Data and Analysis - reinforce/expand sharing and discussion of QA results with RO/LO/partners   | QA, AA's, Data, RO/LO | a. Quarterly report of progress on goals, including a summary of successes, challenges or barriers. B- Examples of action plans developed to strengthen specified results | 2015 & ongoing         |
| 10 |   |  |  | Feedback and Adjustment - Reinforce/expand engagement with RO/LO/Partners in improvement planning   | QA, AA's, Data, RO/LO | Quarterly report of progress on goals, including a summary of successes, challenges or barriers   | 2015 & ongoing         |
| 11 | C | <b>Training:</b> Develop strong personnel competencies to achieve substantial systemic change that will turn strengthen the services provides to the children and families of Puerto Rico (pg 52-57) |  |   |                       |   |                        |
| 12 |   |  | 1. Develop initial staff training modules geared to offering social workers basic competencies focused in safety, permanency and well-being of the child and his family, prior to initiating their work. (CFSR 32) | 1.1.Needs assessment & human resources profile<br>Human (Resources Assistant Administration will provide the total of employees by classification). | Training Office       | Reviewed curriculum each FY   | 2015 & Ongoing<br>2019 |
| 13 |   |  |  | 1.2.Study data from CFSR findings & ADFAN's data profile  | Training Office       |   | 2015 & Ongoing<br>2019 |



|    |  |  |   |   |                 |  |                     |
|----|--|--|---|---|-----------------|--|---------------------|
| 14 |  |  |   | 1.3.Implement policy requirement for initial staff training.  | Training Office |  | 2015 & Ongoing 2019 |
| 15 |  |  |   | 1.4.Review & Update the curriculum according with the evidence based practice.  | Training Office |  | 2015 & Ongoing 2019 |
| 16 |  |  |   | 1.5.Curriculum Implementation   | Training Office |  | 2015 & Ongoing 2019 |
| 17 |  |  |   | 1.6.Training schedule for each region.  | Training Office | Attendance reports for initial staff training and summary of report on compliance with training requirement. | 2015 & Ongoing 2019 |
| 18 |  |  |   | 1.7 Specific training environment “hands to the project” <i>with in situ</i> experience with a coach supervisor, utilizing protocols, formats, and applying the services needed by children and their families. | Training Office | Establish a local office model for concrete transfer of learning to the workplace. FY 2015                   | 2015 & Ongoing 2019 |
| 19 |  |  | 2. Develop ongoing staff training modules geared to offering social workers, supervisors and staff, continuum competencies focused in safety, permanency and well-being of the child and his family. ( CFSR 33) | 2.1.Needs assessment & human resources profile Human (Resources Assistant Administration will provide the total of employees by classification).  | Training Office |  | 2015 & Ongoing 2019 |
| 20 |  |  |   | 2.2.Study data from CFSR findings & ADFAN’s data profile  | Training Office |  | 2015 & Ongoing 2019 |
| 21 |  |  |   | 2.3 Review & Update the curriculum according with the evidence based practice.  | Training Office |  | 2015 & Ongoing 2019 |
| 22 |  |  |   | 2.4 Curriculum Implementation   | Training Office | Reviewed curriculum each FY  | 2015 & Ongoing 2019 |



|    |  |  |   |   |   |   |                     |
|----|--|--|---|---|---|---|---------------------|
| 23 |  |  |   | 2.5 Training schedule for each region   | Training Office   | Attendance reports for initial staff training and summary of report on compliance with training requirement.  | 2015 & Ongoing 2019 |
| 24 |  |  |   | <p>2.6. Specific training environment “hands to the project” experiences with a coach supervisor, utilizing protocols, formats, and applying practice behaviors services needed by children and their families.</p> <p>Utilizing CFSR ADFAN’s findings to develop an accurate curriculum with active learning practice combined with interactive tech skills.</p> | Training Office   | <p>Establish at ADFAN’s central office training room to develop or reinforce competencies as needed for concrete transfer of learning to the workplace. Fy 2016</p> | 2015 & Ongoing 2019 |
| 25 |  |  | Provide to current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care of adoption assistance under Title IV – E that addresses the skills and knowledge base needed to carry out their duties, in child development & rearing. ( CFSR 34) | 3.1.Needs assessment  | Training Office<br>Asst. Admin Foster Care and Adoption (AAFCA) |   | 2015 & Ongoing 2019 |
| 26 |  |  |   | 3.2 Study data from CFSR findings & Foster Care’s data profile  | Training Office<br>AAFCA  |   | 2015 & Ongoing 2019 |
| 27 |  |  |   | 3.3. Implement policy requirement for foster and adoptive parents training.   | Training Office   |   | 2015 & Ongoing 2019 |

|    |   |  |   |  |                                  |  |                     |
|----|---|--|---|--|----------------------------------|--|---------------------|
| 28 |   |  |   | 3.4.Review & Update the curriculum according with the evidence based practice. | Training Office                  |  | 2015 & Ongoing 2019 |
| 29 |   |  |   | 3.5. Curriculum Implementation   | Training Office                  | Reviewed Curriculum  | 2015 & Ongoing 2019 |
| 30 |   |  |   | 3.6 Training schedule for each region  | Training Office                  | Attendance reports for training and summary of report on compliance with training requirement. | 2015 & Ongoing 2019 |
| 31 |   |  | Provide to lawyers and support personnel training content that addresses the skills and knowledge base needed to carry out their duties, in child welfare system. ( CFSR Case Review Systemic Factor) |  | Training Office and Legal Office |  | 2015 & Ongoing 2019 |
| 32 |   |  |   | 4.1.Needs assessment   | Training Office and Legal Office |  | 2015 & Ongoing 2019 |
| 33 |   |  |   | 4.2.Study data from CFSR findings  | Training Office and Legal Office |  | 2015 & Ongoing 2019 |
| 34 |   |  |   | 4.3.Curriculum Implementation  | Training Office and Legal Office | Reviewed Curriculum each FY  | 2015 & Ongoing 2019 |
| 35 |   |  |   | 4.4 Training schedule for each region  | Training Office and Legal Office | Attendance reports for training and summary of report on compliance with training requirement. | 2015 & Ongoing 2019 |
|    |   |  |   |  |                                  |  |                     |
| 36 | D | Goal: Child safety, permanency and wellbeing will be the paramount for ADFAN's staff at all levels, on CPS |   |  |                                  |  |                     |

|    |  |                                |  |   |   |   |           |
|----|--|--------------------------------|--|---|---|---|-----------|
|    |  | intervention/service delivery. |  |   |   |   |           |
| 37 |  |                                | 1. To strengthen the protective factors in individuals, families and communities in order to reduce the risk factors that contributes to the violence in the family in the form of child neglect and maltreatment and domestic violence for the promotion of a culture of peace in the general population (primary, universal, prevention) . |   |   |   | 2015-2019 |
| 38 |  |                                |  | 1.1 The School for Healthy Living and Parenting will continue offering the educational modules to adults, pre-adolescents adolescents and children in a primary (universal) prevention base. The modules are: “Working for Family Peace”, “Family Peace Promoters”, “Leading Trough the Road for Peace”, Youth Working for Peace” and “Child Sexual Abuse Prevention” | Schools for Healthy Living and Parenting (SHLP) : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS | Workshop calendar                                       | 2015-2019 |
| 39 |  |                                |  |   |   | Register or list of the citizens that will participate. | 2015-2019 |

|    |  |  |  |   |  |  |           |
|----|--|--|--|---|--|--|-----------|
| 40 |  |  |  |   |  | Total of workshops offered.  | 2015-2019 |
| 41 |  |  |  |   |  | -Numbers of participants by workshops.   | 2015-2019 |
| 42 |  |  |  |   |  | -Number of participants graduated.   | 2015-2019 |
| 43 |  |  |  |   |  | -Results of pre-post tests.  | 2015-2019 |
| 44 |  |  |  | 1.2 Family Peace Promoters will organize groups to offer the module “Working for Family Peace”. | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS | Family Peace Promoters calendar to offer the module to other citizen’s groups. | 2015-2019 |
| 45 |  |  |  |   | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS | Register or list of the citizens that will participate.                        | 2015-2019 |
| 46 |  |  |  |   | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS | Number of Family Peace Promoters offering the module.                          | 2015-2019 |
| 47 |  |  |  |   | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS | -Total of workshops offered.   | 2015-2019 |

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| 48 |  |  |  |   | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS  | -Numbers of participants by workshops.                             | 2015-2019 |
| 49 |  |  |  |   | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS  | -Number of participants graduated.                                 | 2015-2019 |
| 50 |  |  |  |   | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS  | -Results of pre-post tests.  | 2015-2019 |
| 51 |  |  |  | 1.3 Awareness campaigns on family violence prevention, protective factors, spaces for peace, educational activities and orientation on Law 246 for the prevention of child abuse and neglect. | SHLP Community Based Organizations (CBOs) : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS; Carl Bittman, Executive Director CBCAP, ASFA and Violence Prevention | -Total of campaigns, activities, spaces for peace and orientations | 2015-2019 |

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|    |  |  |  |  | Programs  |  |           |
| 52 |  |  |  |  |   | -Calendar for the delivery of the activity | 2015-2019 |
| 53 |  |  |  |  |   | -Registry of participants                  | 2015-2019 |
| 54 |  |  |  |  |   | -Numbers of participants.                  | 2015-2019 |
| 55 |  |  |  | 1.4 Continue offering the workshop for the prevention of educational negligence.                   | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS  | -Total of workshops offered.               | 2015-2019 |
| 56 |  |  |  |  |   | -Numbers of participants by workshops.     | 2015-2019 |
| 57 |  |  |  |  |   | -Results of pre-post tests                 | 2015-2019 |
| 58 |  |  |  | 1.5 Awareness campaigns and activities during April for the prevention of child abuse and neglect. | SHLP CBOs : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS; Carl Bittman, Executive Director CBCAP, ASFA and Violence Prevention | -Total of activities.                      | 2015-2019 |

|    |  |  |  |   |   |  |           |
|----|--|--|--|---|---|--|-----------|
|    |  |  |  |   | Programs  |  |           |
| 59 |  |  |  |   |   | Numbers of Participants                | 2015-2019 |
| 60 |  |  |  | 1.6 Workshops on sexual education in the community for the prevention of unwanted pregnancies.  | Nurse Home Visiting Program "Safety Nest"<br>PSSF Program<br>CBOs: Carolyn Chaparro, TS; Carl Bittman, Executive Director ASFA        | Total of workshops offered             | 2015-2019 |
| 61 |  |  |  |   |   | Nujmber of participatns by workshop    | 2015-2019 |
| 62 |  |  |  |   |   | Results of pre and post tests          | 2015-2019 |
| 63 |  |  |  | 1.7 Workshops on parental skills to pregnant women in the community promoting pre and post natal care and the importance of attachment. | Nurse Home Visiting Program "Safety Nest"<br>PSSF Program<br>CBOs: Carolyn Chaparro, TS; Carl Bittman, Executive Director CBCAP, ASFA | -Total of workshops offered.           | 2015-2019 |
| 64 |  |  |  |   |   | -Numbers of participants by workshops. | 2015-2019 |
| 65 |  |  |  |   |   | -Results of pre-post tests.            | 2015-2019 |
| 66 |  |  |  | 1.8 Programs and workshops for children 3-12 years old to acquire   | PSSF<br>CBOs: Carl Bittman, Executive Director  | Total of workshops offered.            | 2015-2019 |

|    |  |  |  |   |  |   |           |
|----|--|--|--|---|--|---|-----------|
|    |  |  |  | knowledge and skills for auto-protection from sexual abuse.   | ASFA   |   |           |
| 67 |  |  |  |   |  | -Numbers of participants by workshops.  | 2015-2019 |
| 68 |  |  |  |   |  | -Results of pre-post tests.   | 2015-2019 |
| 69 |  |  |  |   |  | -Evidence of skills developed.  | 2015-2019 |
| 70 |  |  | 2. To increase the protective factors in individuals, families and neighborhoods in order to reduce the risk factors that cause violence in the family in the form of child neglect and maltreatment and domestic violence in high risk populations. | 2.1 The School for Healthy Living and Parenting will continue offering the educational modules to adults, pre-adolescents adolescents and children in a secondary (selective) prevention base. The modules are: "Working for Family Peace", "Family Peace Promoters", "Leading Trough the Road for Peace", Youth Working for Peace" and "Child Sexual Abuse Prevention" | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS | Total of workshops offered.   | 2015-2019 |
| 71 |  |  |  |   |  | -Numbers of participants by workshops.  | 2015-2019 |
| 72 |  |  |  |   |  | Results of pre- post tests.   | 2015-2019 |
| 73 |  |  |  |   |  | -Total of participants that graduate  | 2015-2019 |
| 74 |  |  |  |   |  | -Number of activities offered that meets the individuals, families and neighborhood needs | 2015-2019 |



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| 75 |  |  |  | 2.2 On a basis of needs assessment the establishment Centers for Family Peace and Support in high risk neighborhoods in three (3) regions with high incidence of negligence, negligence and emotional maltreatment and physical maltreatment. | SHLP : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS               | Total of workshops offered.   | 2015-2019 |
| 76 |  |  |  |   |  | -Numbers of participants by workshops.  | 2015-2019 |
| 77 |  |  |  |   |  | -Results of pre-post tests.   | 2015-2019 |
| 78 |  |  |  |   |  | -Total of participants that graduate from the module Working for Family Peace.            | 2015-2019 |
| 79 |  |  |  |   |  | -Number of Family Peace promoters certificated.   | 2015-2019 |
| 80 |  |  |  |   |  | -Number of groups formed by the family peace promoters.                                   | 2015-2019 |
| 81 |  |  |  |   |  | Number of other modules from SHLP offered to residents in the neighborhood.               | 2015-2019 |
| 82 |  |  |  |   |  | -Number of coordination and referral to other services                                    | 2015-2019 |
| 83 |  |  |  |   |  | -Number of activities offered that meets the individuals, families and neighborhood needs | 2015-2019 |
| 84 |  |  |  | 2.3 Continues with the collaboration with Proyecto REDES and Family in your Community both are preventive projects at the Department of the Family.   | School for Healthy Living and Parenting : Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; | -Total of workshops offered.  | 2015-2019 |

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|    |  |  |  |   | Carolyn Chaparro,<br>TS  |   |           |
| 85 |  |  |  |   | SHLP : Ana I.<br>Vázquez, TS;<br>Lourdes Grajales,<br>TS; Madeline<br>Santiago, TS;<br>Carolyn Chaparro,<br>TS | -Numbers of participants by<br>workshops.   | 2015-2019 |
| 86 |  |  |  |   | SHLP : Ana I.<br>Vázquez, TS;<br>Lourdes Grajales,<br>TS; Madeline<br>Santiago, TS;<br>Carolyn Chaparro,<br>TS | -Results of pre-post tests.                 | 2015-2019 |
| 87 |  |  |  |   | Nurse Home Visiting<br>Program “Safety<br>Nest”: Carolyn<br>Chaparro, TS                                       | -Numbers of adolescents and women<br>served | 2015-2019 |
| 88 |  |  |  |   | Nurse Home Visiting<br>Program “Safety<br>Nest”: Carolyn<br>Chaparro, TS                                       | -Results of pre-post tests.                 | 2015-2019 |
| 89 |  |  |  | 2.4 Respite care for the<br>attention of children of<br>families in crisis, families of<br>handicapped children or single<br>mothers with situations that<br>may put on risk the well-being | Promoting Safe and<br>Stable Families<br>(PSSF)<br>CBOs: Carl Bittman,<br>executive Director<br>ASFA           | -Number of approved projects.               | 2015-2019 |

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|    |  |  |  | and safety of the child and the stability of family life.  |  |  |           |
| 90 |  |  |  |  |  | -Number of children and families served.     | 2015-2019 |
| 91 |  |  |  | 2.5 Home visiting programs with families with children 0-3 years old in risk of maltreatment offering parental skills, stages of child development and strengthening the family environment. | CBCAP<br>CBOs: Carl Bittman,<br>Executive Director<br>CBCAP      | -Number of approved projects.                | 2015-2019 |
| 92 |  |  |  |  |  | -Number of children and families served.     | 2015-2019 |
| 93 |  |  |  |  |  | -Number of home vising services.             | 2015-2019 |
| 94 |  |  |  | 2.6 Programs that provides cognitive-behavioral therapies for parents and children from families in risk in order to increase the protective factors.  | CBCAP<br>CBOs: Carl Bittman,<br>Executive Director<br>CBCAP      | Number of approved projects.                 | 2015-2019 |
| 95 |  |  |  |  |  | -Number of children and families served.     | 2015-2019 |
| 96 |  |  |  | 2.7 Continue offering the Nurse Home- Visiting Program “Family Nests” in Humacao and Mayagüez Region   | Nurse Home Visiting Program “Safety Nests”: Carolyn Chaparro, TS | Total of adolescents and young woman served. | 2015-2019 |
| 97 |  |  |  |  |  | Total of infants receiving the service       | 2015-2019 |
| 98 |  |  |  |  |  | Number of families served by the program.    | 2015-2019 |

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| 99  |  |  |  |   |  | Reduction in the number of pregnant adolescents.  | 2015-2019 |
| 100 |  |  |  |   |  | Qualitative and quantitative data demonstrating positive results in obtaining the programs goals. | 2015-2019 |
| 101 |  |  |  | 2.8 Provide educational, recreational and cultural services to families with children and adolescents in poverty areas.                     | CBOs from PSSF, CBCAP and CSBG Programs.<br>CBOs: Carl Bittman, Executive Director ASFA, CBCAP; Rossy Santiago, Director CSBG  | Documented collaborative efforts.   | 2015-2019 |
| 102 |  |  |  |   |  | Number of approved projects.  | 2015-2019 |
| 103 |  |  |  |   |  | Number of children and adolescents served by type of service/activity.                            | 2015-2019 |
| 104 |  |  |  |   |  | Frequency of parent's participation.  | 2015-2019 |
| 105 |  |  |  |   |  | Quantity and qualitative evaluations.   | 2015-2019 |
| 106 |  |  |  | 2.9 Provide workshops and other activities to strengthening couple, marital and parent child relationships in families at risk of violence. | CBOs from PSSF and CBCAP Programs: Carl Bittman, Executive Director SHLP: Ana I. Vázquez, TS; Lourdes Grajales, TS; Madeline Santiago, TS; Carolyn Chaparro, TS<br>Schools for Family Life (SFL): Lourdes Grajales, TS | Number of projects.   | 2015-2019 |

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| 107 |  |  |  |  |   | Number of workshops.                                    | 2015-2019 |
| 108 |  |  |  |  |   | Number of participants.                                 | 2015-2019 |
| 109 |  |  |  |  |   | Identified positive changes within participants.        | 2015-2019 |
| 110 |  |  |  |  |   | Lees or not violent behavior.                           | 2015-2019 |
| 111 |  |  |  |  |   | Level of satisfaction with services.                    | 2015-2019 |
| 112 |  |  |  | 2.10 Continue the delegation of funds to non- profit organization for the provision of services for victims of domestic violence.  | Domestic Violence Prevention Program (DVPP): Carl Bittman, Executive Director | Number of projects and services provide.                | 2015-2019 |
| 113 |  |  |  |  |   | Number of women, children, men and older adults served. | 2015-2019 |
| 114 |  |  |  |  |   | Types of services developed.                            | 2015-2019 |
| 115 |  |  |  |  |   | Changes or progress evidenced by the participants.      | 2015-2019 |
| 116 |  |  |  |  |   | Participants level of satisfaction.                     | 2015-2019 |
| 117 |  |  |  |  |   | Project's directory                                     | 2015-2019 |
| 118 |  |  |  | 2.11 Delegate funds from the Promoting Safe and Stable Families Support Program, Community Based Child Abuse Prevention Program and Domestic Violence Prevention Program for projects on parenting skills, workshops and training for non- violent behaviors in child rearing practices and family living. | PSSF CBCAP DVPP CBOs: Carl Bittman, Executive Director                        | Number of projects.                                     | 2015-2019 |
| 119 |  |  |  |  |   | Number of participants.                                 | 2015-2019 |
| 120 |  |  |  |  |   | Number of workshops.                                    | 2015-2019 |
| 121 |  |  |  |  |   | Less or not violent behavior.                           | 2015-2019 |
| 122 |  |  |  |  |   | Satisfaction with services                              | 2015-2019 |

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| 123 |  |  |   |  |  | Project's directory                                    | 2015-2019 |
| 124 |  |  |   | 2.12 Identify and coordinate education job training services and other support services to woman in low income communities through family support services provided by contracted community based organizations. | CSBG<br>CBOs: Rossy Santiago, Director   | Number of participants.                                | 2015-2019 |
| 125 |  |  |   |  |  | Services provided according to their needs.            | 2015-2019 |
| 126 |  |  |   |  |  | Participants level of satisfaction.                    | 2015-2019 |
| 127 |  |  |   |  |  | Numbers of participants that achieve auto-sufficiency. | 2015-2019 |
| 128 |  |  | 3. Support the initiatives of CBO,s for the delivery of an array of programs and services to meet the multiple necessities of the children and families at risk served by ADFAN in an individual and accessible manner. | 3.1 Continue the delegation of funds to non-profit community based agencies according to the community and family's needs.   | PSSF<br>CBCAP<br>CSBG<br>CBOs: Carl Bittman, Executive Director ASFA, CBCAP; Rossy Santiago, Director CSBG | Services provided.                                     | 2015-2019 |
| 129 |  |  |   |  |  | Number of participant's families and individuals.      | 2015-2019 |
| 130 |  |  |   |  |  | Changes at family and individual level.                | 2015-2019 |
| 131 |  |  |   |  |  | Satisfaction level of participant's                    | 2015-2019 |
| 132 |  |  |   |  |  | Project directory.                                     | 2015-2019 |

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| 133 |  |  |  | 3.2 Coordinate the provision of child care services for woman in high poverty neighborhoods served by community based organizations (CBOs) contracted to provide support services in the community such as respite care, after school educational and recreational programs, tutoring which enable parents to work or engage in educational activities. | CBCAP<br>PSSF<br>CSBG<br>CBOsCarl Bittman, Executive Director<br>ASFA, CBCAP; Rossy Santiago, Director<br>CSBG  | Services provided according to their needs.   | 2015-2019 |
| 134 |  |  |  |   |   | Promotion of alternative child care services.   | 2015-2019 |
| 135 |  |  |  |   |   | Number of women receiving alternative services.   | 2015-2019 |
| 136 |  |  |  |   |   | Number of children and adolescents receiving the services.  | 2015-2019 |
| 137 |  |  |  |   |   | Satisfaction level of participant's.  | 2015-2019 |
| 138 |  |  |  |   |   | Project directory.  | 2015-2019 |
| 139 |  |  |  | 3.3 The CBCAP, PSSF, VD and CSBG Programs will work in close collaboration with the Child and Families Services Plan to help develop a structured network of community agencies that provide an array of services aligned with participants needs.  | AAPCS<br>Asst. Admin.: Sarah E. Lladó; Family Preservation and Strengthening Services (AAFPSS): Hilda Rodríguez; Asst. Admin. Foster Care and Adoption (AAFCA): Elsa Rodríguez and Carl | Convoke a committee formed by governmental and non-governmental agencies to study and planning the process for the establishment of the system. | 2015-2016 |

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|     |  |  |   |   | Bittman, Executive Director CBCAP, ASFA and Violence Prevention Programs |  |           |
| 140 |  |  |   |   |  | Assistance to the committee meetings.  | 2015-2016 |
| 141 |  |  |   |   |  | Meeting agenda.  | 2015-2016 |
| 142 |  |  |   |   |  | Meeting reports.   | 2015-2016 |
| 143 |  |  |   |   |  | Written agreements.  | 2015-2016 |
| 144 |  |  |   |   |  | Network of community agencies providing an array of services to our clientele. | 2017-2019 |
| 145 |  |  | 4 Reduce and/or avoid the long term effects of violence in the family in the form of child abuse and neglect and domestic violence in individuals and families in order to prevent revictimization, disability and psychopathology and ameliorate the causes of violence in violent communities in a tertiary (indicated) prevention basis. | 4.1 Continue offering the workshops of the module "Rearing with good treatment we construct family peace" from the Schools for Family Life to parents of children in the preservation program and/or foster care with a plan to return to home. | Schools for Family Life: Lourdes Grajales, TS                            | Total of workshops offered.  | 2015-2019 |
| 146 |  |  |   |   |  | Numbers of participants by workshops.  | 2015-2019 |
| 147 |  |  |   |   |  | Results of pre-post tests.   | 2015-2019 |
| 148 |  |  |   |   |  | Total of participants that graduate  | 2015-2019 |



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| 149 |  |  |  |  |  | Participants level of satisfaction.  | 2015-2019 |
| 150 |  |  |  | 4.2 Revise the module in the School for family life to actualize and align it with the needs of the clientele of preservation and foster care services | SFL: Lourdes Grajales, TS  | Assist to meetings with the AAFPS and the AAFCA in order to evaluate the module “Rearing with good treatment we construct family peace” and update it according to the needs of the clientele. | 2015-2016 |
| 151 |  |  |  |  |  | Module revised   | 2015      |
| 152 |  |  |  | 4.3 Delegate funds to non-profit organization for the provision of shelters for victims of domestic violence.  | Domestic Violence Prevention Program: Carl Bittman, Executive Director | Number of projects and services provide.   | 2015-2019 |
| 153 |  |  |  |  |  | Number of women, children, men and older adults served.  | 2015-2019 |
| 154 |  |  |  |  |  | Types of services developed.   | 2015-2019 |
| 155 |  |  |  |  |  | Changes or progress evidenced by the participants.   | 2015-2019 |
| 156 |  |  |  |  |  | Participants level of satisfaction.  | 2015-2019 |
| 157 |  |  |  |  |  | Reduction of domestic violence incidents.  | 2015-2019 |
| 158 |  |  |  |  |  | Project’s directory.   | 2015-2019 |

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| 159 |  |  |  | <p>4.4 Continue the provision of services through the Encuentro Project to improve the relationship of non-custodial parents with their children in situations of domestic violence and other types of violence. Continue offering services for the promotion of:</p> <ul style="list-style-type: none"> <li>Filial responsibility</li> <li>Economic responsibility</li> <li>Parent and child bonding</li> <li>Protection and prevention</li> <li>Establish and maintain communication between parent and child</li> </ul> | <p>Access and Visitation Program-Project Encuentro (ProyectoEncuentro): Madeline Santiago, TS</p> | <p>Number of custodial and no custodial parents and children benefitted from the service.</p> | <p>2015-2019</p> |
| 160 |  |  |  |  | <p>Access and Visitation Program-Project Encuentro (ProyectoEncuentro): Madeline Santiago, TS</p> | <p>Number of case discussions.</p>  | <p>2015-2019</p> |
| 161 |  |  |  |  | <p>Access and Visitation Program-Project Encuentro (ProyectoEncuentro): Madeline Santiago, TS</p> | <p>Number of supervised visits and exchange.</p>  | <p>2015-2019</p> |
| 162 |  |  |  |  | <p>Access and Visitation Program-Project Encuentro (ProyectoEncuentro)</p>                        | <p>Participants level of satisfaction.</p>  | <p>2015-2019</p> |

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| 163 |   |   |  |  | Access and Visitation Program- Project Encuentro (ProyectoEncuentro ): Madeline Santiago, TS | Project's directory   | 2015-2019 |
| 164 | E | Goal: Provide an array of services to assess child and family strengths; create a safety home environment for in-home cases and help children in foster care to achieve their permanency with the inclusion of different partners al community and agency level in the different intervention phases. |  |  |  |   | 2015-2019 |
| 165 |   |   | 5. Strengthen the engagement of different partners in the protection, safety, well-being and permanency of children through better communication and cooperation in order to provide individualized appropriate in time, child centered and family focused services. | 5.1 Follow up to the collaborative agreements signed by agency departments, municipalities, non-profit organizations, community based organizations and community based faith organizations. | Assistant Administration for Prevention and Community Services (AACPS): Ana I. Vázquez, TS   | Person designated from the Assistant Administration for Prevention and Community Services that connect the agencies, municipalities and CBO's with the Assistants Administrators of Family Preservation and Foster Care services to coordinate the delivery of services | 2015-2019 |
| 166 |   |   |  |  | AAPCS:Ana I.   | Coordination of the meetings.   | 2015-2019 |

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|     |  |  |  |   | Vázquez, TS                                    |   |           |
| 167 |  |  |  |   | AAPCS:Ana I. Vázquez, TS                       | Assistance to the meetings.                                   | 2015-2019 |
| 168 |  |  |  |   | AAPCS:Ana I. Vázquez, TS                       | Meeting agenda.   | 2015-2019 |
| 169 |  |  |  |   | AAPCS:Ana I. Vázquez, TS                       | Mutual agreements process.                                    | 2015-2019 |
| 170 |  |  |  |   | AAPCS:Ana I. Vázquez, TS                       | Meeting reports.  | 2015-2019 |
| 171 |  |  |  |   | AAPCS: Ana I. Vázquez, TS                      | Number of array of services provided.                         | 2015-2019 |
| 172 |  |  |  |   | AAPCS: Ana I. Vázquez, TS                      | Number of children and families beneficated.                  | 2015-2019 |
| 173 |  |  |  | 5.2 Prepare in a fiscal year basis a Directory of Services and Collaborative Agreements that compiles the array of services available to the children and families of ADFAN. Include the four eligible entities of Community Services Block Grant Program 5% discretionary (CSBG) Include collaborative agreements signed by agency departments, municipalities, non-profit organizations, community based organizations and community based faith organizations. | AACPS: Sarah E. Lladó, Assistant Administrator | Directory of Services and Collaborative Agreements completed. | 2015-2019 |

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| 174 |  |  |  |  | AAPCS: Sarah E. Lladó, Assistant Administrator | Delivery of the Directory of Services and Collaborative Agreements to the different levels of ADFAN: central, regional and local offices. | 2015-2019                    |
|     |  |  |  |  |  |   |                              |
| 175 |  |  | Improve timeliness of initiating investigations of reports of child maltreatment, including new and active cases and reports. (CFSR 1) |  | AACPS<br>Dir. Training & QA                    | Achieve CFSR Item 1 Goal of 66.3% per QA or quantitative report   | <b>2015 and ongoing 2019</b> |
| 176 |  |  |  | Continue implementing plans with ROs/LOs to monitor, address, and strengthen investigation timeliness                                | AACPS  | Update on plans and results   | <b>2015</b>                  |
| 177 |  |  |  | Training of direct service and supervisory staff   | AACPS<br>Dir. Training & QA                    | Revise training curriculum  | 2015                         |
| 178 |  |  |  |  | AACPS<br>Dir. Training & QA                    | Training plan   | 2015                         |
| 179 |  |  |  |  | AACPS<br>Dir. Training & QA                    | Implement training  | 2015                         |
| 180 |  |  |  | Coaching   | AACPS<br>Dir. Training & QA                    | Develop coaching curriculum   | 2016                         |
| 181 |  |  |  |  | AACPS<br>Dir. Training & QA                    | Training plan & implementation plan   | 2016                         |
| 182 |  |  |  |  | AACPS<br>Dir. Training & QA                    | Implement coaching  | 2016-2017                    |
| 183 |  |  |  | Real time reports are established to measure and assure timely compliance with initial face to face contacts in open case referrals. | AACPS<br>Dir. Training & QA                    |   | 2015                         |
| 184 |  |  |  | Quarterly reports are established to illustrate level of improvement achieved  | AACPS<br>Dir. Training & QA                    | Reports format is designed  | Quarterly                    |

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| 185 |  |  |  |  | AACPS<br>Dir. Training & QA           | Distribution schedule on a quarterly basis            | 2017      |
| 186 |  |  |  |  | AACPS<br>Dir. Training & QA           | Action plans are generated by middle management staff | 2017-2019 |
| 187 |  |  | Prevent the children abuse in Foster care  | Establish a workgroup to include, the Institutional Child Abuse Units workers, personal from residential facilities, supervisors and external stakeholders for development curriculum training for staff and foster parents. | AAFPS Institutional Maltreatment Unit | Work group Institutional Child Abuse                  | 2015      |
| 188 |  |  |  | Training to strengthen staff competencies in prevent the child abuse in foster care  |                                       | Training plan & implementation plan                   | 2016      |
| 189 |  |  |  | Training the foster parents and personal in residential facilities for prevent the child abuse.  |                                       | Training plan & implementation plan                   | 2016-2019 |
|     |  |  |  |  |                                       |   |           |
| 190 |  |  | Safety 2 Improve services to family to protect children in the home and prevent removal or re-entry into foster care |  | Family Preservation                   | Achieve CFSR Item 3 Goal of 24.7% per QA review       |           |
| 191 |  |  |  | Training to strengthen staff competencies in the evaluation of safety  |                                       | Training workshops curriculum designed                | 2015      |
| 192 |  |  |  |  |                                       | Training plan   | 2015      |
| 193 |  |  |  |  |                                       | Implement training                                    | 2016-2019 |
| 194 |  |  |  | Continuous coaching through the Quality Circle in safety management and documentation  |                                       | coaching curriculum developed                         | 2015      |

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| 195 |  |  |  |  |                | Training plan & implementation plan   | 2015      |
| 196 |  |  |  |  |                | Implement coaching  | 2015-2019 |
| 197 |  |  |  | Develop policy instructing to coordinate SIPH for families with an in-home safety plan, included families in the process of reunification and redefining SIPH eligibility criteria |                | Signed policy by administrator  | 2015      |
| 198 |  |  |  | Expand and strengthen SIPH units island wide   |                | Create units in Aguadilla and Guayama   | 2016      |
| 199 |  |  |  |  |                | staff Retrained   | 2016      |
| 200 |  |  |  |  |                | Expand the capacity of each unit to serve 300 more families according to necessities and resources available. | 2018-2019 |
|     |  |  |  |  |                |   |           |
| 201 |  |  | Safety 2:To improve intervention in CPS situations with emphasis on risk assessment and safety management. |  | AAFPS<br>AAFCA | Achieve CFSR Item 4 Goal of 17.9% per QA review   | 2018-2019 |
| 202 |  |  |  | Continuous coaching in safety management and documentation   | AAFPS<br>AAFCA | Training plan and implementation  | 2015-2019 |
| 203 |  |  |  |  | AAFPS<br>AAFCA | Discussion of SW Specialist visit results   | 2015-2019 |
| 204 |  |  |  | Align TDM strategy with safety model criteria for services/safety plan development and conditions for return or modifications to permanency plan.                                  | AAFPS<br>AAFCA | Review TDM documentation form to include Safety Model criteria  | 2015      |

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| 205 |  |  |  |   | AAFPS<br>AAFCA | Written memorandum establishing the use of the TDM strategy in Family Preservation Cases                                  | 2015      |
| 206 |  |  | Well Being 1: Enhance families' capacity to provide for their children's needs through the provision of adequate services. |   | AAFPS<br>AAFCA | Achieve CFSR Well-Being Goals per QA review:<br>Items 17 - 24.9%<br>Item 18 - 23.7%<br>Item 19 - 14.4%<br>Item 20 - 28.6% |           |
| 207 |  |  |  | Describe Agency procedures to comprehensively assess and document the needs of children, parents and foster parents and the service necessary to achieve case plan goals  | AAFPS<br>AAFCA | Written description   | 2015      |
| 208 |  |  |  | Design training workshop curriculum for workers and supervisors   | AAFPS<br>AAFCA | Training plan & implementation plan   | 2016-2019 |
| 209 |  |  |  | Develop schematic guide for assessing family needs including the identification of special needs in the minors and link such appropriate services required by the family. | AAFPS<br>AAFCA | Establish workgroup to develop schematic guide  |           |
| 210 |  |  |  |   | AAFPS<br>AAFCA | Schematic Guide developed   | 2016      |
| 211 |  |  |  |   | AAFPS<br>AAFCA | Training to support the guide through coaching strategy   | 2017-2019 |



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| 212 |  |  |  | Continuous coaching through the Quality Circle for strengthen and Increase the frequency, quality and documentation of casework visits with children, parents and foster parents. | AAFPS<br>AAFCA | Results Of Casework Contact frequency and quality per QA review and Quantitative measures for :<br>Children in Preservation cases<br>Parents in Preservation cases<br>Children in Foster Care cases<br>Parents in Foster care cases<br>Foster Parents of children in care | 2015 and ongoing<br>2019 |
| 213 |  |  |  |   |                | Training workshops curriculum designed  | 2016                     |
| 214 |  |  |  |   | AAFPS<br>AAFCA | Training plan & implementation plan   | 2016                     |
| 215 |  |  |  |   | AAFPS<br>AAFCA | Implement coaching  | 2016-2019                |
| 216 |  |  |  |   |                | QA Report   | 2017-2019                |
| 217 |  |  |  | Develop guidelines for planned visits to parents / mothers, including the father / mother including the absent parent (non-custodial parents)                                     | AAFPS<br>AAFCA | Establish workgroup to develop guidelines   | 2015                     |
| 218 |  |  |  |   | AAFPS<br>AAFCA | Guidenlines developed   | 2015                     |
| 219 |  |  |  |   | AAFPS<br>AAFCA | Training to support the guidelines implementation through coaching strategy   | 2015-2019                |
| 220 |  |  |  | Clarify Family conference policy by establishing the benchmarks the cw needs to complete during the commitment and evaluation stages to involve the family in case planning       | AAFPS<br>AAFCA | Policy promulgation   | 2015                     |

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| 221 |  |  |  |   | AAFPS<br>AAFCA | Training to support the policy through coaching strategy             | 2016-2019 |
| 222 |  |  |  | Develop professional competencies in supervisory staff to enable them to design appropriate services plans for the families and children. | AAFPS<br>AAFCA | Training workshops curriculum designed                               | 2016      |
| 223 |  |  |  |   | AAFPS<br>AAFCA | Training plan & implementation plan                                  | 2016      |
| 224 |  |  |  |   | AAFPS<br>AAFCA | Implement through coaching strategy                                  | 2017-2019 |
| 225 |  |  |  | Develop guidelines for the physical, cognitive and behavioral stages of development.  | AAFPS<br>AAFCA | Specific guidelines for each stage of development.                   | 2016-2018 |
| 226 |  |  |  | Develop intervention protocol according to the developmental stages of children.  | AAFPS<br>AAFCA | Workgroup to develop intervention protocol                           | 2017      |
| 227 |  |  |  |   | AAFPS<br>AAFCA | Intervention protocol developed                                      | 2017      |
| 228 |  |  |  |   | AAFPS<br>AAFCA | Training to support the intervention protocol                        | 2017-2019 |
| 229 |  |  |  | Continue holding Family Conferences (TDM) in the two (2) pilot regions (Humacao and Carolina)   | CASEY          | Completed forms, attendance sheet and list of cases to be discussed. | 2016-2018 |
| 230 |  |  |  | Expand the Family Conferences (TDM) to two (2) additional regions (Arecibo and Aguadilla)   | CASEY          | Training Design, Attendance sheet and Evaluation sheet.              | 2016-2016 |

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| 231 |  |  | Permanency 1: :Improve services to achieve permanency and stability for children in their living situations | Continue with the Cross-Training entitled: <i>“Childhood and Adolescent Welfare: Integration to Speed Up the Permanence Plans”</i> , in coordination with the Courts Administration for the remaining regions: Caguas, Carolina and Humacao. | AACSA OAT DJ | Training Design, attendance, evaluation and pre and post exam sheet. | 2015-2016 |
| 232 |  |  |   | Continue using the Round Table strategy in the three (3) pilot regions (Caguas, Guayama and San Juan)  | AACSA CASEY  | Completed forms, attendance sheet and list of cases to be discussed  | 2016-2018 |
| 233 |  |  |   | Expand the Round Table strategy to two (2) additional regions (Mayaguez and Ponce)   | AACSA CASEY  | Training Design, Attendance sheet and Evaluation sheet               | 2016-2018 |
| 234 |  |  |   | Develop a policy instructing caseworkers to prepare plans for siblings to visit each other at least twice a month.   | AACSA        | Standard   | 2016      |
| 235 |  |  |   | Increase visits by minors with a Permanence Reunification Plan to their father/mother/care taker   | AACSA        | Increase visits by 50%.  | 2016      |
| 236 |  |  |   | Coordinate training sessions aimed at adoptive and foster parents on the mental and physical health of the minors to strengthen their capacities and increase their knowledge of minors with special needs.                                  | AACSA        | Design and training, attendance sheet, evaluation sheet.             | 2015-2019 |
| 237 |  |  |   | Review the collaborative agreements with Adoption Agencies.  | AACSA        | Evidence of reviewed collaborative agreements.                       | 2015-2016 |

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| 238 |  |  |   | Early detection of every minor deprived of custody by the regional committees to refer them to the Adoption Unit.                              | AACSA                  | Findings Report by Region based on the forms evaluated for referrals | 2015-2019 |
| 239 |  |  |   | Promote the minors with special needs through a variety of activities.   | AACSA                  | Evidence of the promotion activities                                 |           |
| 240 |  |  |   | Promote the recruitment of homes for adoption.   |                        | # new homes achieved   |           |
| 241 |  |  |   | Develop a new educational and informational campaign on adoption agreements and voluntary surrender.   |                        | report on campaign   |           |
| 242 |  |  | Develop the competence and skills of the Adoption Unit SW and Supervisors to improve the quality of the analysis and development of the social study conducted on applicant families. | Technical assistance from the Casey Family Program   | AACSA<br>CASEY         | TA Plan  |           |
| 243 |  |  |   | Training for the SW and Supervisors of the 10 Adoption Unites  | AACSA<br>CASEY         | pre and post test  |           |
| 244 |  |  |   | Forms to be used in evaluating the quality of the drafting and analysis of the social study.   | AACSA<br>TA from CASEY | Forms  |           |
| 245 |  |  |   | Training for the Adoption Unit on the rights that the various families have to receive equal service.  | AACSA TA from<br>CASEY | Training design and attendance                                       |           |
| 246 |  |  | Strengthen the pre and post adoption services   | Reorganize the support group for Adoptive Parents (Focal Group) in coordination with the Puerto Rican Association of Adoptive Parents (APPA in | AACSA<br>TA from CASEY | Report on regorganization outcome                                    | 2015-2016 |

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| 247 |   |   |  | Organize the (adopted) mentor youth support group.  | AACSA   | Report on Group existence/activities        | 2016      |
| 248 |   |   |  | Develop orientation, educational and support activities through various means of communications.  | AACSA   | Examples of communications utilized..       | 2015-2019 |
| 249 |   |   |  | Coordinate a variety of activities for adoptive families.   | AACSA   | Report on activities provided.              | 2015-2019 |
| 250 |   |   |  | Coordinate a variety of activities for adopted minors and minor adoption candidates.  | AACSA   | Report on activities provided.              | 2015-2019 |
| 251 |   | <b>DATA SYSTEMS</b>   |  |   |   |   |           |
| 252 | F | Gaining buy-in by staff and improving practices regarding the use of the information systems. | Ensuring that the information systems are <i>useful</i> and <i>usable</i> for staff, by conducting a comprehensive review of all the screens, by content owners. |   |   |   |           |
| 253 |   |   |  | a. TA on NJ Spirit information system, arranged by RO, and provided by the State of NJ Department of Children and Families/Office of Information Technology to learn about full system capabilities, lessons learned in the implementation process, | Deputy Administrator, Data Committee member , Softek Reps (2) | a. Trip to NJ and consultation carried out. | 9-Jun-14  |

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|     |  |  |  | cultural change, and others. TA included ADFAN staff and vendor representatives.   |   |   |                         |
| 254 |  |  |  | b. Logic Information behind NJS: RO arranged for NJS to share with ADFAN the source code. This will be used as a reference, to ensure that the (CMIS), being developed by PR, meets the standard federal requirements. | Data Committee members, Deputy Administrator  | b Transmission of Logic Information behind NJS. | Aug-14                  |
| 255 |  |  |  | C. Identification of modules that are not operational and will be discarded for immediate use.   | Data Committee members, Deputy Administrator  | c Modules identified                            | Aug-14                  |
| 256 |  |  |  | d. Identification and correction of poorly translated screens.   | Data Committee members,, Deputy Administrator | d. Translation corrected in order of priority.  | Aug-14                  |
| 257 |  |  |  | e. Screens (forms, letters, others) up-dated to reflect current law requirements, agency norms, procedures and standards   | Data Committee members, Deputy Administrator  | e. Screens (forms, letters and others) up-dated | Aug-14                  |
| 258 |  |  |  | f. Conduct usability testing by experienced systems' users, to identify problems or difficulties that discourage use of the system and need to be  | Data Committee members, Deputy Administrator  | f. usability tests scheduled and carried out    | August 2014 and ongoing |

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|     |  |  |  | corrected.   |   |   |                   |
| 259 |  |  |  | g. Vendor to design solutions.   | Vendor  | g. Solutions designed and implemented in the system (Priority will be given to the ones related to generating the AFCARS file).   | Aug 2014-Sep 2014 |
| 260 |  |  |  | h. Users- access to all users and roles up-dated   | Data Committee members, Vendors, Deputy Administrator | h. Agile, uniform procedure to simplify manner in which users are up dated and security levels are maintained   | Sep-14            |
| 261 |  |  |  | i. Providers-develop uniform procedure for clean-up of existing providers, on-going entry of new providers and maintaining providers up-dated. | Data Committee members, Deputy Administrator          | i. Agile, uniform procedure designed by vendor.   | Sep-14            |
| 262 |  |  |  | j. Associate Directors and regional Supervisors to assure errors are corrected within the expected margin of time.                             | AssociateDirectors                                    | j. Errors corrected as evidenced in the nightly Batch run, Report measuring compliance with data entry standards set in the June 2013 policy and other data entry QA efforts. | 2014-2019         |
| 263 |  |  |  | SIRCSe<br>a. FN-81 completed to facilitate case migration from SIRCSe  | UIE Supervisors                                       | a. FN-81 are completed, routinely   | 2014-2019         |
| 264 |  |  |  | b. All information data elements are completed   | UIE Supervisors                                       | b. All information data elements completed  | 2014-2019         |

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| 265 |  |  |   | CMIS<br>The effort described above to bring SICStA and SIRCSe up to date is essential for the successful implementation of the CMIS  | Data Committee members, Deputy Administrator |                                       |                    |
| 266 |  |  | Communicating, clearly, the purpose and benefits of the integrated case management information system and including the on-going and punctual entry of data in SIRCSe and SICStA to ensure that required information is captured in both systems. | a. Develop a vision and mission statement of ADFAN's Integrated Information System   | Administrator                                | a. Visión/Mission statement approved. | Dec-14             |
| 267 |  |  |   | b. Routine reports and announcements in ADFAN's newsletter and other means to communicate ADFAN's vision/mission regarding the information system, including that it is here to stay, that it is an agency priority, and progress achieved by regions or individual services programs, on systems updates that are being worked on or implemented. | Regional System Coordinators                 | b. Routine reports and announcements  | August 2014 - 2019 |
| 268 |  |  |   | c. Obtaining ADFAN's staff e-mail distribution list (island wide) to assure the newsletters and other communications are sent to all system's users and not just the Associate and regional Directors  | Deputy Administrator                         | Distribution List obtained and used   | Jul-14             |



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| 269 |  |  | Strengthening the Help Desk to become more responsive to systems' users | a. Identification of current problems with the Help desk that discourages systems' use.   | Data Committee members, Deputy Administrator         | a. Problems identified and corrected                     | August 2014 and ongoing   |
| 270 |  |  |   | b. Establishment and monitoring of performance standards for the Help Desk  | Data Committee members, Deputy Administrator         | b. Standards developed/reviewed and compliance monitored | December 2014 and ongoing |
| 271 |  |  | Targeted Training   | <p>a. The training need for each user will be identified.</p> <ul style="list-style-type: none"> <li>• A 'refresher course' will be provided to users that were originally trained on SIRCSe or SICStA, and that remain in the same job position and service program.</li> <li>• Full scale training will be delivered to new staff and to experienced staff that was never trained on the system, (for example, adoption units). It will also be provided to staff that was trained and promoted from direct service to a supervisory position.</li> <li>• Supervisors will have additional training on the use of the system from the perspective of the supervisor.</li> </ul> | Data Committee members, Deputy Administrator         | a. Training needs for each user identified               | August - December 2014    |
| 272 |  |  |   | b. <i>The original training materials will be used, thereby reducing the effort involved.</i>   | Regional System Coordinators<br>Data entry committee | b. original training materials will be used              | August - December 2014    |

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| 273 |  |  |  | c. Users will also be grouped by the service program they work for, so they pay special attention to the systems' features that are directly related to their daily work.(Adoptions, Substitute Care, Licensing, UMI, IV-E, Independent Living, SIS, Supervisors, direct service workers, UIE and so on.) | Regional System Coordinators<br>Data entry committee | c. Users grouped according to training need     | August - December 2014 |
| 274 |  |  |  | d. Information will be collected from users during the training sessions about systems pitfalls that need to be addressed, including gaps in policy and others. Training will be initiated with the Information System Coordinators.  | Regional System Coordinators<br>Data entry committee | d. Information about systems pitfalls collected | August - December 2014 |
| 275 |  |  |  | e. Training will be delivered in a hands-on learning approach, in a room set with computers.  | Regional System Coordinators<br>Data entry committee | e. Hands-on training                            | August - December 2014 |
| 276 |  |  |  | f. Training groups will average 10 trainees and will be led by a presenter and a coach.   | Regional System Coordinators<br>Data entry committee | f. small training groups                        | August - December 2014 |
| 277 |  |  |  | g. Training on the new integrated information system will also be delivered in the targeted manner, described   | Regional System Coordinators<br>Data entry           | g. CMIS training (c-f)                          | August - December 2014 |

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|     |  |  |  | above  | committee  |  |                           |
| 278 |  |  | Ongoing coaching and other supports  | a. Coaching will continue after the training and will be provided by the Information System Coordinators.  | QA Director<br>Deputy Administrator                  | a. Coaching Plan                                       | Oct-14                    |
| 279 |  |  |  | b. Coordinators will further develop their competencies on the information system and on coaching skills through training and other supports.  | QA Director<br>Deputy Administrator                  | b. Ongoing training activities for coaches             | November 2014 and ongoing |
| 280 |  |  |  | c. Creation of a virtual library that will include: "how to tips", programmatic manuals and other pertinent information.   | QA Director<br>Deputy Administrator                  | c. Virtual Library Created                             | Dec-14                    |
| 281 |  |  | Identification of visible and tangible results that meet the most urgent agency needs and that staff also identifies as a gain for them. (win/win situation) | a. Prioritize and target individual regional, service program and agency wide results or benefits that are very tangible and visible, to use them as selling points. Some of these could be worked concurrently. (Ex. Entering all required data into SICStA will substitute paper forms, will free time from SIS staff that could better be used in other system tasks, will enable the transmission of AFCARS from SICStA and produce a valid baseline). | Regional System Coordinators<br>Data entry committee | a. Identification of the 'what's in it for me' factors | Aug-14                    |

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| 282 |  |   |   | b. Structure as short term deliverables.   | Regional System Coordinators Data entry committee | b. Short term deliverables  | Aug-14                |
| 283 |  |   |   | c. Communicate the results achieved agency wide or by individual regions or services program.  | Regional System Coordinators Data entry committee | c. Targeted results achieved communicated   | Aug-14                |
| 284 |  |   | Naming of the new integrated case management system | A contest or another mechanism will be used to name the new integrated system, with significant participation of system users.   |   | Name Selected   | Dec-14                |
| 285 |  | Continuous Entry of all the data requirements, for all the children under custody, with and open case during any part of the period beginning on October 1, 2013 and forward. | Coordination of Units at the regional level         | a. Develop a strong coordination between the support/service units that depend on this inventory (IV-E, Finance, SIS, Legal Units, Substitute Care, Licensing and local offices) to create a master inventory that is kept up-to-date, with reliable information and that will be shared by these service units. | Associate Directors                               | a. Written instructions by each Associated Director about procedure to be implemented in each region. | August - October 2014 |
| 286 |  |   |   | b. Master Inventory of children in substitute care will be used to double-check and assure that all children that are in this inventory also entered into the information system to have all the children in the AFCARS, NYTD, IV-E, and financial/payment files.  | Associate Directors                               | b. Master Inventory   | August - October 2014 |

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| 287 |  |  | Emphasis on results and Quality Assurance | a. Visits to each regional office by ADFAN Administrator and Sub-administrator to require achievement on specific performance standards, including the punctual and on-going entry of reliable NCANDS AND AFCARS data into the information systems.  | Administrator<br>Deputy Administrator | a. visiits schedule                        | Aug-14                    |
| 288 |  |  |   | b. To give Local, Regional Supervisors, Information Systems Coordinators, Associate and Regional Directors access to the compliance reports developed to measure performance on standards set on policy to ensure that the legal status, demographic characteristics, location, and placement goals and placement changes, for each child in foster care, are entered into SICStA in a timely manner and are readily available upon entry to care. | Vendor                                | b. Access given                            | Sep-14                    |
| 289 |  |  |   | c. Associate Directors will monitor weekly performance and take the necessary actions to assure compliance.  | Associate Dir.                        | c. Improvements in the level of compliance | November 2014 and ongoing |
| 290 |  |  |   | d. Night run of cases entered, errors/missing data identified  | Associate Dir                         | d. Improvements in the level of compliance | November 2014 and ongoing |

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| 291 |  | Revise and take necessary actions to assure that only the cases that need case management services are the ones that are opened in the Family Preservation Services Program | To create a master Inventory      | All cases to be reviewed and cases for closing will be identified.                                | Associate Directors<br>Regional Supervisors    | Master Inventory of Family Preservation cases                 | Dec-14                 |
| 292 |  |   | Case closings                     | Cases closed will be closed in the system by completing FN-81 in SIRCSe                           | Associate Directors<br>Regional Supervisors    | Only cases needing case managing service will remain open.    | Dec-14                 |
| 293 |  |   | Trainings                         | Training on the CMIS  | Vendor/regional Coordinators                   | Training  | March 2014 and ongoing |
| 294 |  |   | Cases documentation in the system | Each case manager will enter and document case intervention as soon as he/she completes training. | LO Supervisors<br>Regional Supervisors         | Cases entered and documented on-going into the CMIS platform. | March 2014 and ongoing |
| 295 |  | Perform Gap analysis of SICStA's IV-E Module enhancements   | Perform gap-analysis              | Perform gap-analysis  | Business Analyst<br>IV-E staff                 | Gap analysis performed  | 2015                   |
| 296 |  |   | Evaluate impact                   | Evaluate financial impact and contract amendments   | IT consultant<br>Legal and Financial Directors | Signed contract   | 2015                   |
| 297 |  |   | Development and implementation    | Enhancements developed and ready for implementation   | IV-E Director                                  | Enhancements developed  | 2015                   |

## SERVICES (D4)

ADFAN is under the umbrella of the Department of the Family (DF), which also administers and supervises services to needy families (ADSEF), services to early childhood (ACUDEN), and child support services (ASUME). As a state administered child welfare system, an array of services is provided through these four Administrations that are easier and faster to coordinate for the benefit of the participants we all share. Local level offices are structured as integrated service centers, where staff of the four Administrations shares a common physical space.

Operationally, this translates into informal and formal contacts and operating procedures that many times result in a more comprehensive and agile delivery structure within the continuum of services that the agency offers. The coordination with ADSEF is one of the strongest ones; for example, coordination of benefits when a child is removed or returned home is related to the TANF and the nutritional benefits (PAN). ADFAN is reinforcing this coordination with both ADSEF and ASUME as it strengthens its T.IV-E program.

The DF/ADFAN, however, cannot on its own provide the comprehensive array of services that families in PR need. As stated earlier in this document, in the *Law for the Protection, Well-being, and Protection of Minors*, No. 246 of December 16, 2011, the Department of the Family incorporated into its public policy statement, the principle of *shared responsibilities* among public government agencies. It mandates that the Department of the Family, government agencies and community organizations work together in the attention and prevention of child abuse. Furthermore, multiple collaborative projects and committees will continue to have the continued support and active participation of DF/ADFAN. Some of these collaborations (Multi-sectorial Board, “*Justicia para la Niñez*” (Court Improvement Project), *Children’s Justice Act Task Force*, *Multi-sectorial Boards*, *Citizen Review Panels*, *Youth Council and Young Peer Mentoring Groups*, among others) have the expressed purpose of obtaining stakeholder input into the agency’s strategic planning and setting service priorities.

ADFAN will continue to build the service array continuum through the purchase of services such as forensic evaluations of sexual abuse (PAF), therapeutic foster homes (COPA), residential treatment (PRIME) and many others. The coordinated use of PSSF, CSBG, CBCAB and Family Violence funds will be articulated through, for example, the Differential Response strategy that ADFAN will be developing over the next five years. This strategy will promote coordination among multiple partners within the continuum of services, pooling of resources and expanding the service array so that recipient families benefit from effective services, a strong delivery structure and attention to their multiple needs.

Following, is a more detailed description of each of the Assistant Administrations through which ADFAN carries out its ministerial responsibilities. Each programmatic service area is assigned a 20% of the funds to support the services each one provides.

### **The Assistant Administration for Prevention and Community Services**

This Assistant Administration establishes and implements primary, secondary and limited tertiary prevention services in communities throughout Puerto Rico, with the goal of strengthening families and promoting a culture of peace at their community's context through the following programs:

**The Community Development Program** is comprised of services under the Community Services Block Grant (CSBG). Primary and secondary prevention services are directed to residents in low income communities to promote self-sufficiency and improve the quality of life of the individuals and families, and the maximum participation of residents in the identification and solution of their needs, in conjunction with government and community agencies and groups.

**School for Healthy Living and Parenting (“Escuelas para la Convivencia y la Crianza”)** provides primary prevention educational services through four training modules targeting adults, adolescents and children. The objective is to promote a culture of peace within communities, positive parenting skills, youth management of their sexuality, prevention of child abuse and the development of leadership skills among community residents:

1. **Working Towards Family Peace (“Trabajando para la Paz Familiar”)** - To promote a culture of peace within the context of the community, focuses in developing positive leaders to be Peace Makers (“Constructores de Paz”) to assure the continuity of a message of peace in their communities.
2. **Leadership Skill-Building Training Modules: “Family Peace Promoters”- (“Promotores/as de la Paz Familiar”)** – Workshops aim at strengthening the strategy of joint social responsibility for the prevention of family violence, child maltreatment and domestic violence. Participants of the “Working Towards Family Peace” modules, who demonstrate leadership potential, are selected to develop those skills through participation in these workshops. They also develop the commitment to promote family peace in their communities.
3. **“Youth Working for Peace Modules” (“Jóvenes Trabajando por la Paz”)** these workshops target youth between 12 through 18 years of age. They promote the message of peaceful co-existence in the home and community contexts.
4. **“Leading through the Road for Peace”– (“Por el Camino de la Paz”)** These workshops aim to help children, between 6 through 12 years of age, to develop a strong and healthy self-esteem, to internalize those values that promote the search for the common good, justice, peace and equality.
5. **“Child Sexual Abuse Prevention”** (Prevención de Abuso Sexual) these workshops are geared toward developing parenting skills and community strategies to protect children against sexual abuse.



The Program **"Encounter" ("Encuentro")** assists children from families involved in domestic violence by offering supervised parental visits, pick up and drop off with the non-custodial parent in a safe environment outside their homes.

**"School for Family Life" ("Escuelas para la Vida en Familia")** is a tertiary prevention model to reeducate parents that have exhibited abusive or neglectful behaviors, and teach them healthy child-rearing practices, to prevent the recurrence of maltreatment or negligence. Also, it offers primary prevention workshops to the general public and psycho-educative activities to the children of the participants.

The **Domestic Violence Prevention Program**- Administers funds received through the Family Violence Prevention Act. It delegates and monitors use of funds to non-profit organizations and municipalities to provide shelter and support services, such as legal advice, counseling and social work services, for women that are survivors of domestic violence and their minors.

The **Support and Prevention Services Program**– Administers funds received through the "Promoting Safe and Stable Families". It delegates and monitors use of funds to non-profit agencies and municipalities to provide child abuse and violence prevention services: improve parenting skills, prevent school desertion by means of tutoring, sports, arts and recreational activities in after school programs, prevent teen pregnancy and promote knowledge and understanding of human sexuality, among others.

The **Community Based Child Abuse Prevention Program**– Administers funds received through the Family Violence Prevention Act. It delegates and monitors use of funds delegate's funds to non-profit organizations and municipalities to develop community based networks aimed at supporting families, promoting parenting skills, and preventing teen pregnancy in children and adolescents with or without disabilities.

This Assistant Administration with the collaboration of the other Assistant Administrations, developed the collaboration agreements that will expand ADFAN's service array and that seeks to increase accessibility and meet the individualized needs of children served by the agency.

## **ASSISTANT ADMINISTRATION FOR CHILD PROTECTIVE SERVICES**

The Assistant Administration for Child Protective Services is responsible for the investigation of intrafamilial CA/N referrals. As one of its primary components, the State Center for the Protection of Children is responsible for the operation of the Child Abuse and Neglect Hotline and the Orientation and Family Support Hotline. Both lines are responsible for providing an expedite system of communication to receive family and/or institutional referrals, investigation of CAN referrals and to provide orientation and crisis intervention in different areas of family life. It also, operates the Central Registry which maintains updated statistical and programmatic information about the movement of CAN referrals and cases receiving services by ADFAN. The Regional Investigation Units make the initial contact with the alleged child victim/s and their families according to the priority response assigned by the Hotline.

Investigators assess for the presence of child safety threats, implement protective and safety actions on behalf of the children and give disposition to intrafamilial and institutional CA/N referrals. Interventions may involve court contact in order to protect the child.

- **Central Register:** work unit that receives and records all child abuse investigations conducted in Puerto Rico. Performs search history of abuse as requested. Processes applications for removal of investigations. Maintains a file of referrals and investigations of institutional abuse. The central registry receives an average of 500 requests per month. The limitations in the management have been as a result of processes that require revisions to the application process are more specific and defined. For this reason we are working on the review of the procedures of the Central Registry to make the changes
- **Hot line:** A special communication system for Child Protection that "Hotline Abuse Situations, Institutional Abuse, Neglect and Institutional Neglect", through which all people will be called to report situations of abuse, institutional abuse, neglect and / or institutional neglect of children, twenty-four (24) hours a day, seven (7) days a week. All referrals of abuse, institutional abuse, neglect or institutional neglect, will be investigated to any time of day or night, any day of the week. The hotline received a total of 135,873 calls, of which only 30% become child abuse referrals.
- **Orientation line:** special communications system, cost free, attached to State Center for Child Protection Guidance Line which will be called and will offer professional guidance to any individual or family who requests it. Support and strengthen individuals and families in order to improve their social functioning and family relations. Offering guidance to citizens to identify and detect risk factors associated with abuse, violence and other social ills. Serves the general population:
  - All ages
  - Gender
  - Nationality
  - Social origin
  - Political and religious ideas

This service is used for general guidance and social work required so it is a tool that is being used to divert situations not represent a situation of abuse, and that do not meet the criteria and are referred to social counseling services.

- **Investigations units:** a special program for intervention in situations of child protective. The units are located in 10 regions ADFAN to cover the entire island. Its overall purpose is the investigation of child protection referrals 0-17 and situations under state custody. But the drive to have a time 24/7 emergency serves adults with disability and elderly, family's social emergencies, hazard assessment in situations of institutional abuse. In the referrals received for research, according to data from the information system

(SIRCSe) fiscal year 2013-2014, there were a total of referrals 33,076, of these 41% were children's between the ages of 4 - 7 years, by type of negligence. The region more referrals received is Bayamon, San Juan and Ponce. 84% of the referrals under investigation were unsubstantiated. The difficulties encountered in the research process are associated with the large number of referrals January 2013 were in arrears. This severely impact the service and response time affection. Other reasons also allocated are currently all referrals received are handled through an investigation, even including those who no risk and that the service demand dilate more to be tapped. For this reason it is worked with a different response model.

### **ASSISTANT ADMINISTRATION FOR FAMILY PRESERVATION AND STRENGTHENING SERVICES**

The service is responsible for the delivery of family preservation services to families, to assure the safety, development and well-being of their children, while they remain in their own home. It works towards improving the protective capacities of the parents, and towards preventing the removal of the children from their homes. It works in collaboration with the families, communities, services providers and other public and private agencies in the development and implementation of integrated services to assure the preservation of the family unit. It promotes the safety, stability and well-being of children, victims of intrafamilial and institutional maltreatment, of women victims of domestic violence and families with children with multiple social, emotional adaptation problems, as well as, double diagnosis and special needs.

To meet this goal, the ADFAN, has adopted the general practitioner model focused on the family, model "Hombuilders" and Security model. In these intervention is framed and is the basis for the provision of protective services to minors. These models provide the conceptual and philosophical, framework as well as the structure of methodological for framing the intervention services worker.

#### **The family preservation services in the ADFAN include:**

- **Intensive In-Home Preservation Service**, aimed at families in crisis, particularly when the child's removal is imminent in order to preserve the family unit. They promote the empowerment of the family. Are flexible, focused services build on the strengths of the family and increase the protective capacities of caregivers. Services are specific to the family resolve the crisis which puts at imminent risk to the child's removal. The Intensive IN Home Preservation Services (SIPH) units were maintained but not at its optimum level due to: lack of personnel, administrative problems, elimination of two regional work units Aguadilla in 2011 and Guayama in 2012. Eight units were maintained. The referrals backlog increased dramatically, this was one of the reasons that the SIPH social workers were assigned to investigate referrals affecting the work that have to be done. Since 2010 when the Law 7 was applied it lead to decrease of social workers, supervisors and assistants due to retirement, some were transferred to

other local offices, some resign their positions, other were promoted into new positions. In July 2013, the personnel that are needed to complete the components that are required for the units were identified and a recruitment process was initiated. The recruitment of the needed personnel began to strengthen the workforce for the reinstatement of the units in the regions that the program is not established as in the ones that there is a lack of personnel. During the period 2013-2014 the amount of families and minors that received intensive in-home preservation services by region, were 273 families with 548 minors.

- **Preservation Services** is offered to families where the period of critical crisis has been overwhelmed, there is accommodation, and focuses the causes or contributing problems to create the risk of maltreatment to minors. Family preservation service offered to the families in the ADFAN for a period of 12 months through the 93 local offices in the 10 regions. In 2011 the mandated standard in the provision of the 12 month family preservation services was modified to provision the service until six months. This change responds to changes brought by the New Child Protection Law of P.R. No. 246, of December 16, 2011, which limits the period for the Agency to complete reasonable efforts. This represented a challenge for the ADFAN if we evaluate the results of the CFSR of 2010 when one of the concern was the lack of services in some communities and the lack of sufficient ADFAN staff made it difficult for ADFAN to provide the services needed by families and the other was there were safety concerns in the children's homes that were not addressed by the agency. The ADFAN developed on December 2010 a Program Improvement Plan (PIP) in response to the findings from the Federal Child and Family Services Review (CFSR). In the past PIP Puerto Rico clarified the areas of ambiguity in CPS policy of the Safety Model requirements to ensure child safety assessments are conducted throughout the life of the case in all stages of service delivery –and created a protocol for completing initial and ongoing risk and safety assessments for children and families particularly in family preservation cases and children in foster care.

This protocol incorporated the stages of the Family Centered Generalist (FCG) Model adopted by ADFAN, to sustain positive outcomes for Safety, Permanency and Well-being for children and families. ADFAN developed training and it has been already trained 637 workers and supervisors. However the implementation began recently by what still has not been reached the goals in the provision of the service. Actually 14,166 cases are classified as in-home preservation services.

- **Investigation and attention of institutional child abuse referrals and cases.** The service aims to promote and maintain the security and protection of minors placed in treatment, rehabilitation, educational establishments or care outside the home, a day of 24 hours or part of a day, by investigating referrals of institutional abuse. Presently

there are only two responses (24 hours and urgency within 48 hours). categories for all institutional abuse referrals, which do not allow for a better distribution and assignment of referrals in accordance to the level of urgency, or to establish a more accurate division of referrals according to the variety of situations that are referred. Even when the confines of the two priorities that are presently in place will continue to affect compliance, the lack of sufficient staff for the intervention in institutional child abuse referrals continues to hinder a more prompt response in these referrals. Among all the referrals received, we have established that foster care referrals have priority over other referrals, such as schools; the specific content of the allegations, are as well considered, to determine the response priority. If by reviewing the safety assessment guide for referrals Institutional Abuse, requires changes in the priority of response will be reviewed again. During the five year period we have worked on developing procedures that can contribute toward the prevention of institutional abuse by providing children, parents and service providers with information concerning the rights of children to be protected from abuse and creating awareness among all concerned, about the responsibility to ensure the safety and protection of children in foster care.

- **Sexual Abuse Evaluation and Treatment Services.** The service is one outsourced for evaluation and care including psychotherapy to children and their families in situations of sexual abuse at the island level. The contract includes training for ADFAN's staff and for foster homes. A new contract for sexual abuse evaluation services was signed with PAF in January 2014. The program offered evaluation services to 671 minors and treatment services to 108 minors through all Puerto Rico The Assistant Administrator Preservation and Strengthening Family and Community by the Services Coordinator at Central Level PAF have restructured some procedures for operation as follows and effectiveness of the services of PAF:
  - ADFAN was reviewed and amended procedures for referrals from the Special Investigations Unit (UIE), Institutional Abuse and Local Assistance Program for Victims of Sexual Abuse and Family Offices (PAF).
  - PAF was reviewed and amended the referrals documents for evaluation and treatment.
  - ADFAN been allocated a case manager in "Mi Vida" Centers for collaboration and follow up on cases referred to the PAF.

During this year, this Assistant Administration has undertaken the initiative of making fully operational, again, the Centers for the forensic evaluation of sexual abuse allegations. In a collaborative effort that will be described in the next section, ADFAN will be operating three Centers modeled after the Child Advocacy Centers. The goal is for each Center to gain accreditation as such by the "National Children's Alliance".

- **Family Homemaker Service** as a support service for preserving families and preventing family disruption. The character of service is temporary and supplementing the protective capabilities of the parents or responsible persons to ensure the safety of children in the home. The number of services provided in Family Homemaker to families receiving preservation, orientation and youth development services were reviewed. The use of the homemaker services in the Preservation Services increased during the period of 2013-2014. The Norms and Procedure Manual for Family Homemaker Services was discussed with the local and regional supervisors and the regions have their resource bank. The services were provided to families receiving preservation services in all regions.
- **Reunification Services** aimed to offer follow-up services to families who returned the child custody to prevent the recurrence of maltreatment.

### **Assistant Administration for Adoption and Foster Care Services**

Provides services to children since their birth up to twenty one years of age (the majority of age in Puerto Rico), placed under the custody of the Department. Foster care is implemented as a safety measure, when it is deemed that the safety and well-being of the child cannot be assure if he/she remains in the home while services are being provided. Early in the intervention, with the participation of the parents, the permanency goal of the child and a services plan is designed to address the behaviors, the way the parents thinks or manages his/her emotions that led to the child's removal. Progress made towards achieving the permanency plan is reviewed about every three months by the courts. The cases of children under the permanent custody of the agency are being reviewed now by the Administrative Review Boards. This represents a change in our case review system brought about during the process of re-negotiation of the PIP. It will allow ADFAN to assure a more realistic caseload of cases to be reviewed administratively and to meet federal requirements regarding the permanency hearings.

The Assistant Administration relies on the following array of services:

**Residential Services** are offered through a variety of options. Among them are: certified or licensed, relative and particular foster homes; group homes and institutions operated by the agency or through purchase of services. The agency operated facilities include: Guayama- a group home for children with disabilities; Ponce- a group home for girls.

**Permanency Plans**- the Adoption and Foster Care division, is responsible for the design and implementation of a permanent plan for each child to assure their permanency. The plans accepted are: Reunification; Adoption; Guardianship and Kinship Guardianship; Placement with Relatives; Long term foster care; Independent Living.

**Information Systems-** Submit to the federal level bi-annual reports to comply with the Automated Foster Care and Adoption Reporting System (AFCARS). The Administration has been working in the development and implementation of the Foster Care and Adoption Information System (SICStA). Automated system is required by, Title IV-E and Title IV-B, to follow up removed children and their placements until the achievement of their permanent plan.

**Interagency Services/Interstate Compact-** This unit of services has the responsibility to coordinate efforts with the different state agencies for the placement and supervision of children as a sending or receiving state as established by the Interstate Compact in the Placement of Children.

**Foster Care Payments Evaluation Unit-** It evaluates and makes decisions about the approval of special substitute care boarding rates, recommended by the regional offices, due to the special physical, emotional or mental needs of the children.

**Health Care Services Unit:** Coordinate efforts with public and private sector for the provision of health care services for the children under the Department of Family custody. Each child in foster care has access to an array on medical, dental, mental health, prescription, assistive equipment and other services through a government provided Universal Health Care card.

**As part of the PIP,** the Adoption and Foster Care Assistant Administration worked with two main areas: Cross training of caseworkers, lawyers, judges and prosecutors in the ASFA regulations and ways to promote collaborative efforts to achieve permanency for kids. As a result of this strategy a regional committee was convened to follow up cases, identify areas for improvement and take corrective actions on a weekly basis. This efforts will continue during the next five years state plan in order to complete deployment of the strategy.

Also, as part of the PIP, ADFAN emitted policy aligning the licensing and certification requirements; it is in the process of a massive effort to bring up to date the licenses and certifications of relative and particular temporary (foster) homes. Training to foster parents was one of the key issues of this strategy. We will continue training our foster and adoptive parents and staff from residential institutions during the CFSP.

#### **Intermediate Level (Regional Offices):**

At the Regional level, the Administration is headed by the Associate Director, (a Social Worker with a master's degree) who is responsible for the implementation and supervision of services provided at the Integrated Services Centers at the local level. Also, supervises the Specialized Services Units, such as Adoption, Institutional Child Abuse and the Special Investigation Units. A staff of Regional Supervisors is in charge of providing follow-up, supervising and



monitoring services both at the local and regional levels.

#### **Local Level:**

A variety of services are provided through local offices (at least one per municipality), with trained Social Workers (SW) and Family Services Technicians (FST). They are responsible for the determination of eligibility and the provision of integrated services to families. Services at the local level are delivered through the Families with Children Services Units, the Socioeconomic Development Units and the Child Support Units. The Socioeconomic Development Units work with the provision of economic assistance (TANF) and assistance through the Nutritional Assistance Program (Food Stamps Program). Child Support Units work with the follow-up on support payments. The Families with Children Services Units work with the continuum of child and family social welfare services, including foster care services, among others. The staff also works with aged and disabled adults.

Priority has been placed in the recruitment process of individuals with a bachelor's degree in social work, in order to improve the quality of services through better-trained and more knowledgeable staff.

#### **Service Decision-Making process for Family Support Services**

See Assistant Administration for Community and Prevention Services

#### **Populations at Greatest Risk of Maltreatment**

During this period, ADFAN identified several populations at greatest risk of maltreatment.

Youths in transition from childhood-For most of youths the transition from childhood can be a difficult experience. Youth who have been in foster care face even greater challenges because they have grown up with many hardships that constitute risk factors. The Independent Living Program was designed to address risk factors such as lack of protection, affection and support from a stable family life; lack of family ties, a positive support network and social support; obstacles in educational development; low self-esteem and lack of confidence and lack of experiences to develop socialization and skills for problem-solving, decision-making and stress management. In the assessment of the services that this population needed the youths were involved in a consultation process. This provided the agency with information that helped to identify needs, youth's tangible and intangible skills and the services in the community, so that an individualized plan will be prepared for each youth for self-sufficiency. This approach facilitated the agency's capacity to empower the youths in making a satisfactory transition to self-sufficiency by providing a continuum of services which included among them: Educational and/or vocational training; Career planning; Job preparation, search and retention, skills development; Health; Housing; Ability to work as a member of a team; Prevention of substance use/abuse (drugs, alcohol & tobacco); Activities to develop emotional maturity ;



Counseling to promote management of unresolved emotional problems; Violence prevention; Skills in identifying and accessing services; Parenting skills development; Orientation on legal rights and responsibilities; Cultural awareness activities; Workshops and counseling to develop a sense of moral social responsibility; Socialization skills development (conflict resolution, problem solving, anger management, communication skills); Mentoring and others.

Under age and/or pregnant high-risk female adolescents and their families - Puerto Rico has one of the highest rates of premature births in the world. Also, the children in the child welfare system and their babies, because of their high mobility, family history and lack of social supports are at very high risk for child abuse and neglect, exploitation and further victimization. The Nurse Home Visiting Project ("Family Nests") was developed as an initiative for the provision of CA/N preventive and supportive services to under age and/or pregnant high-risk female adolescents and their families, in the regions of Humacao and Mayagüez. Another primary target population of the program, during the reporting period has been parenting or pregnant adolescents within the child welfare system. Eighteen municipalities received the services. This primary prevention strategy has consisted of visits to the participant's homes by Graduate Nurses, for orientation on the following topics: Access to Medical Services during and after the Pregnancy, Laws that Protect them, Development of the Fetus, the Process of Childbirth, Benefits of Breast-feeding for the Baby, and Importance of Healthy Eating Habits during her Period of Gestation, among others. This initiative has contributed to reduce those behaviors that put at risk the health of the pregnant adolescent and the fetus. In addition, it has encouraged the youth's continued participation in vocational school/courses or in the university as a means to obtain their economic self-sufficiency. The service has been offered until the child turns two years old. The population has also been served through the delegation of funds to private non-profit organizations, faith based organizations and municipalities to develop service projects to adolescent are pregnancy prevention, in geographic areas of high risk throughout the island.

Data from community needs assessments carried out or commissioned by these entities have been a source of information in identifying the nature and the magnitude of social problems associated with families at risk of violence maltreatment and populations with special needs and poverty. Programs in the Assistant Administration for Prevention and Community Services (CBO's, Schools for Healthy Living and Parenting, Schools for Family Life) have developed and provided workshops directed at strengthening couple, marital and parent child relationships in families at risk of violence. Participants have also received individual and group counseling, social services psychological services referrals to legal, health and other services to promote changes.

ADFAN identified other types of populations, based on information collected through the NCANDS report. For example, NCANDS data has helped to identify the regional offices with the highest incidence of child maltreatment and along with Census data it has been established that woman and their children are among the poorest and with less access to resources than the rest of the population. Given the close relationship between poverty and child

maltreatment, it is not surprising, according to NCANDS 2010 data that women represent perpetrators at a higher rate than men in PR.

Aligned with that data, some of the primary strategies in the PIP were implemented in the municipalities mentioned above. For example, the integrated strategy addressing safety, family centered practice to improve outcomes and results in safety, permanency and well-being are targeting the municipalities of Bayamón, Caguas, Ponce, San Juan, (which are among the ones with the higher rate of CAN) and also Aguadilla, and Guayama. Two out of the three regions targeted by the strategy on achieving timely permanency of children in foster care are San Juan and Bayamón.

The emblematic Project of the Secretary regarding, “Redes” also took into account these statistics. The multidisciplinary Service Centers are being located in “pockets of poverty” in six small “barrios” in Caguas, Cayey, Humacao, Mayaguez, Trujillo Alto and the island municipality of Vieques.

### **Services for Children Under the Age of five**

ADFAN maintains the services reported for FY 2013 and acknowledges the need to make more concerted efforts towards meeting the needs of this particular age group. Moving in that direction:

- Through AFCARS, the type of placement where each of these children is placed is identified, on an on-going basis. The purpose is to assure that they are placed in a family not an institutional setting. For children placed in non-family type of settings (shelter/group home/institutional settings) the case record will document the justification for this decision and the same will have to be aligned with the child’s special needs. The Assistant Administration for Adoption and Foster Care will monitor, through visits, the presence of children under age five in those institutional settings.
- For FY 2014-2015, all the proposals of institutional settings contracted to offer services for children under 10 years old, were revised by the Social Work Specialists. The institutions will be monitored to guarantee that the need for an institutional setting is justified and services offered are appropriate for the child needs: mental health, disabilities, etc. A schedule to visit and evaluate all the institutional settings providing services to foster care kids is in place from August to November 2014.
- ADFAN contracted the Institute of Developmental Disabilities to offer training to caseworkers and supervisors, Child Development and Child with special needs, and to Adoptive and Foster Parents, Identification of Special Needs with Emphasis on Developmental Needs

- The Central level Nurse gives priority to this age group when tracking services provided to this population, according to the monthly report that ASES began to provide to ADFAN regarding health services received.
- The recruitment of foster and adoptive foster and adoptive foster homes for children under five will remain as recruitment priority, especially for those presently placed in shelter/ group home/institutional settings.
- The primary method of identifying these children continues to be through the AFCARS system. The improved collaboration with ASES, provides additional information, to facilitate oversight of this particular age group and the services they are receiving.
- AFCARS contains the data elements that identify the child's age, sex, race, and ethnicity. It also includes whether the child has been clinically diagnosed with a disability or a medically diagnosed condition requiring special care. The disabilities included are: mental retardation, visually or hearing impaired, physically disabled, and emotionally disturbed. According to the AFCARS System, as of June 2014, there are 784 minors below the age of five. Of these 424 are masculine and 360 feminine; 84 minors are reported as having a disability. They are divided as follow:
  - 6 mental retardation
  - 11 blind/deaf
  - 9 disabled
  - 4 disturbed
  - 61 other special need

765 minors are Hispanics, 7 minors aren't Hispanic and 12 unable to determine.

Their ethnicity is classified as follows:

- 56 African American
  - 269 white
  - 99 unable to determine
- Also, the action steps that ADFAN and the Court Improvement Program developed as part of the PIP strategy, enabled the tracking and prompt compliance with the permanency plan terms in the seven (7) regions trained. A Regional Committee in each of the seven Regions, follow up on each of the Foster Care cases. The committee is composed of lawyers, regional supervisors and the Associate Director. A minute is taken in each meeting and the QA office will report the performance of each Region. This tracking will be expanded in the next semester throughout the three other Regions. The achievement of this strategy will have improved results for children of this age group among others.
  - For kids with special needs for whom a family is not willing to adopt, guardianship is an alternative. It is only considered for kids this age if he or she has a severe health condition..
  - Law 185-2011 allows mothers to surrender custody of a child up to three years old in order to allow the kid to be adopted. This is an expedite procedure to achieve permanency. Kids are place with a person or family that has been studied by the adoption unit.

- In partnership with Casey Family Program we began the implementation of the Team Decision Making strategy in two regional offices. We will expand the use of this tool to additional regions as part of the CFSP.
- To comply with the Fostering Connections to Success and Increasing Adoptions Act of 2008, we distributed a normative letter (ADFAN-CSA-2013-011), with specific procedures pertaining the kinship permanency plan and timeframes.
- ADFAN has been using Coaching as a training strategy for supervisors and caseworkers. Training is focused in the development of skills and competencies in assessment, analysis and case management geared to expedite permanency.
- A normative letter was distributed to follow up in the requisite for an initial evaluation and the follow up evaluation.
- Central Level Nurse distributed guides on vaccination requirements by age, gender and frequency. All caseworkers, foster homes and residential facilities received the information. Licensing officers and residential coordinators were trained to review child files and document compliance with the requirements.
- In collaboration with the American Psychiatric System (APS), a clinic was offered to assess and diagnose autism in foster care kids.
- The American Psychiatric System (APS), offered training about psychotropic drugs and their secondary effects to caseworkers and caregivers.
- With Vimar Therapy Group an early prevention services workshop was given.
- Foster parents were trained in different areas pertaining developmental stages and needs for kids 0-5 years. We offered the following trainings:

| <b>FOSTER HOMES TRAINING</b> | <b>UNIVERSIDAD CENTRAL DEL CARIBE<br/>Effects of Trauma and Neurological Disorders on Children's Personality, Abilities &amp; Behavior<br/>*4 Hour Sessions</b> | <b>ATTENDANCE</b> | <b>INSTITUTO DEFICIENCIAS DESARROLLO<br/>Identification of Special Needs with Emphasis on Developmental Needs<br/>*7 Hour Sessions</b> | <b>ATTENDANCE</b> |
|------------------------------|---|-------------------|--|-------------------|
| <b>Bayamón 1</b>             | October 7, 2013   | 10                | December 13, 2013  | 19                |
| <b>Bayamón 2</b>             | October 14, 2013  | 32                | January 16, 2014   | 62                |
| <b>Bayamón 3</b>             | October 21, 2013  | 42                | January 16, 2014   | n/a               |
| <b>Caguas 1</b>              | October 11, 2013  | 14                | December 12, 2013  | 34                |
| <b>Caguas 2</b>              | October 10, 2013  | 20                | January 23, 2014   | 6                 |

|                   |                  |     |                   |     |
|-------------------|------------------|-----|-------------------|-----|
| <b>Carolina 1</b> |                  |     | December 11, 2013 | 7   |
| <b>Carolina 2</b> | October 24, 2013 | 24  | December 16, 2013 | 30  |
| <b>Ponce 1</b>    |                  |     | December 9, 2013  | 43  |
| <b>Ponce 2</b>    | October 31, 2013 | 20  | December 9, 2013  | n/a |
| <b>Ponce 3</b>    | November 1, 2013 | 29  | January 15, 2014  | 17  |
| <b>Ponce 4</b>    | November 8, 2013 | 43  | January 15, 2014  | n/a |
| <b>San Juan 1</b> | October 28, 2013 | 38  | December 18, 2013 | 50  |
| <b>San Juan 2</b> | November 4, 2013 |     | January 17, 2014  | 9   |
| <b>Total</b>      |                  | 272 |                   | 277 |

- Central Level Nurse and a Social Work Specialist participated in the Early Intervention Services System Interagency Council, Health Department. The council meets to assess the performance of the system and give recommendations regarding services
- The Administration for Families and Children established in December 27, 2013 a MOE with the Health Insurance Administration (ASES) to address the specific needs of foster care and adoption minors. Through this agreement will eliminate the barriers created by multiple placements of children in foster homes and the resulting delay of the health insurance process.

ADFAN believes that the developmental needs of children under age five are better addressed in a family setting, and, again, will include as a priority of recruitment efforts, children under age five.

In terms of the targeted services, as reported in the first item, ADFAN will be making concerted efforts to evidence that we are taking a particular look at this age group and will continue to improve services geared to this population in specific.

The major change has been the recognition by ADFAN that the direction services were taking in terms of placing children of this age group in shelters was not the best approach in seeking to meet their particular needs, specially, in regards to attachment issues.

### *Services for Children Adopted from Other Countries*

Post Adoption services will be available for kids adopted in PR or in other countries. We partner with Casey Family Programs to receive technical assistance in various areas, including collaboration with states to achieve permanency for children with families abroad, also in order to work with ICAMA regulations.

## CONSULTATION AND COORDINATION - TRIBES (D5)

- Although PR does not have any Federally recognized tribes PR will take the following steps when a child enters the child welfare system and is a member or eligible for membership in a tribe.

In any CPS intervention initiated by ADFAN, involving an Indian child, reasonable efforts will be made to alleviate the need to remove the Indian child from his or her home. These efforts must involve using available resources of the child's extended family, and initiating communication with the tribe/nation and Indian social services agencies.

If an Indian child enters foster care in PR, efforts will be made to place he/she with a member of the child's extended family and communication efforts with the tribe/nation and Indian social services agencies will be initiated.

In any Indian child custody proceeding initiated by ADFAN, the child's parent or Indian custodian and the child's Indian tribe, will be notified by registered mail, of the pending proceeding and of their right to intervention. If the identity or location of the parent or Indian custodian and the tribe cannot be determined, the notice must be given to the PR State Secretary.

As indicated in the Indian Child Welfare Act, notification of pending proceeding must be provided to the tribe. The contents of such notification of the child custody proceeding should include the following information:

- The child's name, child's date of birth, child's place of birth;
- The child's tribal affiliation, if known;
- The names of the child's parents, dates of birth of the child's parents, places of birth of the child's parents, and the child's mother's maiden name;
- A copy of the petition filed with the court;
- A statement of the rights of the biological parents/custodians to intervene in the proceeding;
- A statement of the right under federal law to court appointed counsel; and
- The location, mailing address and telephone number of the court

## CHAFEE FOSTER CARE INDEPENDENCE PROGRAM (D6)

See separate document.

## MONTHLY CASEWORKER VISIT FORMULA (D7)

As part of the PIP and according to data obtained through the QA Office, the baseline established and reported on Matrix C for seven of the ten regional offices (Aguadilla, Arecibo, Bayamon, Caguas, Guayama, Ponce and San Juan), caseworker visits to children performance

rate reaches only 5% and caseworker visits to parents reaches only 0.99%. These face-to-face visits are mandatory and required by Federal law “*The Child and Family Services Improvement and Innovation Act*” (P.L. 112-34), Title IV-B, y “*The Fostering Connection to Success and Increasing Adoption Act*”.

1. The visit should be a continuous process as part of the services of the child, whereby not should be performed intermittently. Visits to minors must be carried out by the person assigned as head of the case, namely the Social worker or technical services to the family. (CFSR, 2008)
2. According to the Manual on the intervention of safety in the handling of cases in the service of protection to minor (may 2013), at the stage of weighting (first 30 days of being assigned the case), for all cases, the visits should be carried out, with a frequency of two (2) times per week. For cases with a frequency of visits protective action plan must be carried out as stipulated in the document with the family. In the implementation stage, the frequency of the visits sets through the authorization from supervisor according to the child's needs, but with the standard that must be, at a minimum, once a month, both for cases of preservation, as those of substitute care. All visits should be carried out at the place of location of the minor.
3. For cases of Family Preservation, this location is in the biological home or family, including cases with safety plan exists or action protection plan. For foster care cases this location includes: homes seasonal breeding, therapeutic homes, residential facilities, correctional institutions, residential mental health programs or in-home biological, if it is a case where the child is to the test at home.
4. Subsidiary maternal/paternal visit must be done twice a month (once every two weeks) as a minimum. In terms of service providers, establishing that the frequency of visits should be at least once per month, consisting of an individual interview in the home or institution where the child is located.
5. If the minor is located abroad, in a residential health care facility, the frequency of these visits they must be, at the very least every six (6) months.
6. In Protection Service the documentation is considered as essential function, and domain of the case manager writing of history, since documentation shows compliance with the frequency and quality of service standards. They are tied to item 19 (visits,

the case manager the minor) and 20 (visits, the case manager parent) of the CFSR instrument.

Note that all minors under the legal custody of the Department of the Family must be visited including youngsters from 18 to 21 years, according to the established frequency. Puerto Rico Civil Code establishes 21 as the age of majority. ADFAN in its duty of "*parent's patrie*" is obliged to provide all the services and the needs of these young people to meet the age of majority or fulfill its permanency plan.

We will continue to use the funds to support face to face contact with children placed in the USA, and with relatives that are being considered to place children.

## **ADOPTION INCENTIVE PAYMENTS (D8)**

PR has not received any adoption incentive payments for the past years. We are working diligently to achieve permanency for children with adoptive families. If awarded with an incentive, PR plans to use any Adoption Incentive Payments received during the 2015-2019 period for support services:

- Training for adoptive families
- Post adoption services
- Respite care

## **CHILD WELFARE WAIVER (D9)**

This item does not apply as long as PR doesn't have any waiver.

## **TARGETED PLANS WITHIN CFSP (D10)**

*Foster and Adoptive Parent Diligent Recruitment Plan*

*See attachment:*

*Health Care Oversight and Coordination Plan*

*See attachment:*

*Disaster Plan*



*See attachment*

*Training Plan*

*See attachment*