

**EXECUTIVE SUMMARY**  
**Final Report: Maryland Child and Family Services Review**  
**January 2010**

**INTRODUCTION**

This document presents a summary of the findings of the Child and Family Services Review (CFSR) for the State of Maryland. The CFSR is the Federal Government's program for assessing the performance of State child welfare agencies with regard to achieving positive outcomes for children and families. The CFSR is authorized by the Social Security Amendments of 1994 requiring that the U.S. Department of Health and Human Services (HHS) promulgate regulations for reviews of State child and family services programs under titles IV-B and IV-E of the Social Security Act. The CFSR is implemented by the Children's Bureau of the Administration for Children and Families within HHS.

The Maryland CFSR was conducted the week of June 15, 2009. The period under review for the onsite case review process was from April 1, 2008, through June 19, 2009. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the Maryland Department of Human Resources/Social Services Administration (DHR/SSA)
- The State Data Profile, prepared by the Children's Bureau, which provides data for FY 2008 (for the permanency-related measures) and for the 12-month period from July 1, 2007, to June 30, 2008 (for the safety-related measures)
- Reviews of 64 cases (40 foster care and 24 in-home services cases) at three sites: 30 cases in Baltimore City, 17 cases in Baltimore County, and 17 cases in Charles County<sup>1</sup>
- Interviews and focus groups (conducted at all three sites and at the State level) with stakeholders including, but not limited to, children, youth, parents, foster and adoptive parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, child advocates, Tribal representatives, and attorneys

**Background Information**

The CFSR assesses State performance with regard to its substantial conformity with seven child and family outcomes and seven systemic factors. For the outcome assessments, each outcome incorporates one or more of the 23 items included in the review, and each item is rated as a Strength or Area Needing Improvement based on the results of the case reviews. An item is assigned an overall rating of Strength if 90 percent or more of the applicable cases reviewed were rated as a Strength. The evaluation options for these outcomes are "substantially achieved," "partially achieved," or "not achieved." For a State to be in substantial conformity with a

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<sup>1</sup> Originally there were 25 in-home services cases. However, one in-home services case was found to be ineligible for the CFSR because the child was in foster care for over 48 hours during the period under review.

particular outcome, 95 percent or more of the cases reviewed must be rated as having substantially achieved the outcome. Two outcomes—Safety Outcome 1 and Permanency Outcome 1—also are evaluated based on State performance with regard to six national data indicators. For a State to be in substantial conformity with these outcomes, both the national standards for each data indicator and the case review requirements must be met.

There are 22 items that are considered in assessing the State’s substantial conformity with the seven systemic factors. Each item reflects a key Federal program requirement relevant to the Child and Family Services Plan (CFSP) for that systemic factor. An item is rated as a Strength or an Area Needing Improvement based on whether State performance on the item meets the Federal program requirements. A determination of the rating is based on information provided in the Statewide Assessment and from interviews with stakeholders held during the onsite CFSR. Additional information may come from other Federal reports or assessments.

Overall performance on each systemic factor is based on the ratings for the individual items incorporated in the systemic factor. For any given systemic factor, a State is rated as being either “in substantial conformity” with that factor (a score of 3 or 4) or “not in substantial conformity” with that factor (a score of 1 or 2). Specific requirements for each rating are shown in the table below.

**Rating the Systemic Factor**

<b>Not in Substantial Conformity</b>		<b>In Substantial Conformity</b>	
1	2	3	4
None of the CFSP or program requirements is in place.	Some or all of the CFSP or program requirements are in place, but more than one of the requirements fail to function as described in each requirement.	All of the CFSP or program requirements are in place, and no more than one of the requirements fails to function as described in each requirement.	All of the CFSP or program requirements are in place and functioning as described in each requirement.

A State that is not in substantial conformity with a particular outcome or systemic factor must develop and implement a Program Improvement Plan to address the areas of concern associated with that outcome or systemic factor.

Because many changes were made in the CFSR process based on lessons learned during the first round and in response to feedback from the child welfare field, a State’s performance in the second round of the CFSR is not directly comparable to its performance in the first round. Key changes in the process that make comparing performance difficult across reviews are the following:

- An increase in the sample size from 50 to 65 cases
- Stratification of the sample to ensure a minimum number of cases in key program areas, resulting in variations in the number of cases relevant for specific outcomes and items
- Changes in criteria for specific items to increase consistency and to ensure an assessment of critical areas such as child welfare agency efforts to involve noncustodial parents

The specific findings regarding the State's performance on safety and permanency outcomes are presented in table 1 at the end of the Executive Summary. Findings regarding well-being outcomes are presented in table 2. Table 3 presents the State's performance with regard to the seven systemic factors assessed through the CFSR. In the following section, key findings are summarized for each outcome and systemic factor. Information also is provided about the State's performance on each outcome and systemic factor during the State's 2003 CFSR.

### **Key CFSR Findings Regarding Outcomes**

Maryland did not achieve substantial conformity with any of the seven CFSR outcomes. The State did achieve overall ratings of Strength for the following individual indicators:

- Foster care reentries (item 5)
- Proximity of foster care placement (item 11)
- Placement with siblings (item 12)
- Physical health of child (item 22)

Additionally, although repeat maltreatment (item 2) did not reach the 90 percent level required for an overall rating of Strength, it was rated as a Strength in 89 percent of the applicable cases. Maryland met the national standard for the measure assessing the absence of maltreatment of children in foster care.

The CFSR identified the following key concerns with regard to the State's performance in achieving the desired outcomes for children and families:

- Safety Outcome 2 (Children are safely maintained in their homes when possible and appropriate) was substantially achieved in 40.6 percent of the cases reviewed.
- Permanency Outcome 1 (Children have permanency and stability in their living situations) was substantially achieved in 22.5 percent of the cases reviewed.
- Permanency Outcome 2 (The continuity of family relationships and connections is preserved for children) was substantially achieved in 46.2 percent of the cases reviewed.
- Well-Being Outcome 1 (Families have enhanced capacity to provide children's needs) was substantially achieved in only 29.7 percent of the cases reviewed.

In addition, the State did not meet the national standard for the measure assessing the absence of maltreatment recurrence or any of the national standards for the data indicators pertaining to the timeliness and permanency of reunification, the timeliness of adoptions, achieving permanency for children in foster care for extended time periods, or placement stability.

The State's low performance on the outcomes assessed by the CFSR may be attributed in part to the following:

- Policies and procedures have not been consistently implemented and put into practice.
- Parents are not consistently included and involved in case planning and other case actions.

An additional concern noted in the CFSR pertained to the State's own quality assurance (QA) rating for the items as reported in the Statewide Assessment. For some items, these ratings were high and differed considerably from the Federal 2009 CFSR case review findings. This raises questions regarding (1) the effectiveness of the State's QA case review system in identifying the strengths and needs of the service delivery system and (2) the capability of the QA system to accurately evaluate program improvement measures.

### **Key CFSR Findings Regarding Systemic Factors**

With regard to systemic factors, Maryland is in substantial conformity with the systemic factors of Staff and Provider Training and Agency Responsiveness to the Community. The State is not in substantial conformity with the systemic factors of Statewide Information System; Case Review System; Quality Assurance System; Service Array and Resource Development; and Foster and Adoptive Parent Licensing, Recruitment, and Retention. Performance on the items included in these systemic factors is described below.

## **I. KEY FINDINGS RELATED TO OUTCOMES**

### **Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect**

Safety Outcome 1 incorporates two items. One pertains to the timeliness of initiating a response to a child maltreatment report (item 1), and the other relates to the recurrence of substantiated or indicated maltreatment within a 6-month time period (item 2). Safety Outcome 1 also incorporates two national data indicators for which national standards have been established. These data indicators measure the absence of maltreatment recurrence and the absence of maltreatment of children in foster care by foster parents or facility staff.

Maryland is not in substantial conformity with Safety Outcome 1. The outcome was substantially achieved in 69.6 percent of the applicable cases reviewed. This percentage is less than the 95 percent required for substantial conformity. The outcome was substantially achieved in 50 percent of applicable Baltimore City cases, 100 percent of applicable Baltimore County cases, and 75 percent of applicable Charles County cases. Both items were rated as Areas Needing Improvement; however, item 2 was rated a Strength in 89 percent of the cases reviewed. In addition to these case findings, the State did not meet the national standard for the data indicator pertaining to the absence of maltreatment recurrence. However, the State did meet the national standard for the data indicator pertaining to the absence of maltreatment of children in foster care by foster parents or facility staff. The key finding for this outcome

in the 2009 CFSR is that the case reviews identified inconsistent practice in regard to initiating a response to child maltreatment reports in a timely manner and establishing face-to-face contact with children. Additionally, in 2 of the 18 applicable cases, there were two substantiated maltreatment reports, involving similar circumstances, within a 6-month time period.

The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The primary concern identified in the 2003 review was that the State was not effective in preventing maltreatment recurrence.

To address the identified concern, the State implemented the following strategies:

- Implemented Risk-Based Service Planning training to strengthen caseworkers' skills in assessing risk and safety and in developing appropriate plans based on the assessment findings
- Implemented new policy on critical incident response and addressing multiple referrals on the same family
- Revised policy to ensure that safety and risk issues were assessed and addressed prior to case closure and that families were linked to community resources for support once closure occurred
- Reviewed and revised policies related to aftercare services and the development of aftercare service plans to ensure that appropriate services and plans were in place to support families once agency involvement was discontinued

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

### **Safety Outcome 2: Children are safely maintained in their homes when possible and appropriate**

Performance on Safety Outcome 2 is assessed through two items. One item (item 3) assesses State efforts to prevent children's removal from their homes by providing the family with services to ensure children's safety while they remain in their homes. The other item (item 4) assesses efforts to manage safety and reduce risk of harm to children in their own homes and in their foster care placements.

Maryland is not in substantial conformity with Safety Outcome 2. The outcome was substantially achieved in 40.6 percent of the applicable cases reviewed. This percentage is less than the 95 percent required for substantial conformity. The outcome was substantially achieved in 23 percent of applicable Baltimore City cases, 47 percent of applicable Baltimore County cases, and 65 percent of applicable Charles County cases. Items 3 and 4 were both rated as Areas Needing Improvement. Key findings for this outcome in the 2009 CFSR were the following:

- Appropriate services were not consistently provided to families to safely maintain children in their homes.
- The State did not consistently and adequately assess for and address safety and risk factors.

Maryland also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address this outcome in its Program Improvement Plan. The following concerns were identified in the 2003 CFSR:

- The State was inconsistent in providing services to families to prevent placement of children in foster care.
- The State was inconsistent in providing services to families to reduce the risk of harm to children.

To address the identified concerns, the State implemented the following strategies:

- Developed a family-centered practice framework, which includes family engagement, family involvement meetings (FIMs), concurrent permanency planning, and family and community involvement in order to keep children with family and/or in the community
- Revised policy to ensure that safety and risk issues are assessed and addressed prior to case closure and that families are linked to community resources for support the families once the case is closed
- Provided Risk-Based Service Planning training to caseworkers in order to strengthen the skills necessary for identifying and providing the appropriate services to reduce risk and to prevent reentry into foster care
- Implemented the Local Supervisory Review Tool, which incorporates monitoring of risk-based service planning and service plan reviews
- Developed guidelines for the use of local flexible funds to maintain and support family connections and prevent placement of children in foster care
- Implemented the Mental Health Mobile Crisis and Stabilization Services (MCSS) program, which provides community-based, 24-hour intensive in-home services to respond to crisis issues and stabilize situations to reduce risk of harm to children

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

### **Permanency Outcome 1: Children have permanency and stability in their living situations**

Six items are incorporated in the assessment of Permanency Outcome 1, although not all of them are relevant for all of the foster care cases reviewed. The items pertain to State efforts to prevent foster care reentry (item 5), ensure placement stability for children in foster care (item 6), and establish appropriate permanency goals for children in foster care in a timely manner as well as seeking termination of parental rights (TPR) in accordance with the requirements of the Adoption and Safe Families Act (ASFA) (item 7). Depending on the child's permanency goal, the remaining items focus on an assessment of State efforts to achieve permanency goals (such as reunification, guardianship, adoption, or permanent placement with relatives) in a timely manner (items 8 and 9) or to ensure that children who have a case goal of other planned permanent living arrangement (OPPLA) are in stable long-term placements and are adequately prepared for eventual independent living (item 10).

Permanency Outcome 1 also incorporates four national data indicators for which national standards have been established. These data indicators measure the timeliness and permanency of reunification, the timeliness of adoptions, permanency for children in foster care for extended time periods, and placement stability.

Maryland is not in substantial conformity with Permanency Outcome 1 in its 2009 CFSR. The outcome was substantially achieved in 22.5 percent of the foster care cases. This percentage is less than the 95 percent required for substantial conformity. The outcome was substantially achieved in 20 percent of applicable Baltimore City and Baltimore County cases and 30 percent of applicable Charles County cases. Item 5 was rated as a Strength, but items 6, 7, 8, 9, and 10 were rated as Areas Needing Improvement. In addition to the case review findings, Maryland did not meet any of the national standards for the data indicators pertaining to permanency.

Key findings for the cases reviewed during the 2009 CFSR were the following:

- Placement stability was a concern.
- The State was not consistent in establishing appropriate permanency goals for children in a timely manner.
- The State does not consistently file for TPR in a timely manner.
- The State was not consistent in making diligent efforts to achieve permanency for children through reunification, guardianship, or adoption.
- The State was not consistent with regard to ensuring that children with a case plan goal of OPPLA had a permanent placement and/or were receiving services to ensure a successful transition from foster care to independent living.

Maryland also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The following concerns were identified in the 2003 CFSR:

- The State was not consistently effective in preventing reentry into foster care.
- The State was not consistent with regard to ensuring placement stability for children in foster care.
- The State was not consistent with regard to establishing appropriate permanency goals in a timely manner.
- The State did not consistently make concerted efforts to achieve children's permanency goals in a timely manner.
- There were multiple barriers to achieving timely TPR, including court continuances, a lack of effort to identify absent parents early on in the case, a lack of sufficient legal and judicial personnel, a requirement that TPR must be granted for both parents at the same time, and a lengthy TPR appeals process.

To address the identified concerns, the State implemented the following strategies:

- Implemented the Maryland Family Risk Assessment to identify family members who have the capacity to address safety, permanency, and well-being concerns for the child and family in order to prevent the child's reentry into foster care
- Implemented the Family-Centered Practice Model and FIMs to help families plan for support to prevent children from coming into foster care and to address potential disruptions by developing plans to maintain placements for children in foster care

- Implemented the Place Matters initiative, which focuses on avoiding temporary shelter placements, placing children in family settings, providing services to maintain placements (respite, day care, MCSS), and minimizing placement changes
- Implemented the “1000 by 10” initiative to ensure that appropriate placements are available for children in foster care
- Developed and implemented statewide recruitment plans to target specific populations and expanded the use of resources such as AdoptUsKids, Public Service Announcements, and Maryland Adoption Resource Exchange to identify permanent homes for children in foster care
- Trained caseworkers on conducting and completing Safety Assessment for Every-Child Group Residential Provider safety assessments for children in group care
- Implemented a “Best Practice” manual developed by the Foster Care Court Improvement Project and the Administrative Office of the Courts to assist the court in establishing timely and appropriate permanency goals and timely processing of cases
- Enacted a court Continuance and Postponement Policy to improve timeliness of permanency and TPR hearings, revised the Absent Parent Identification litany used during court hearings to assist with early identification of parents, developed a checklist for Children in Need of Assistance and TPR hearings, and incorporated best practices in permanency planning into the court process
- Conducted an examination of the Appellate process, which had presented a barrier to timely TPR
- Revised Maryland Children’s Electronic Social Services Information Exchange (MD CHESSIE) court reports and court orders to provide uniformity in addressing and communicating information in order to increase the establishment of appropriate and timely goals and to improve collaboration and consistency between the courts and the local departments of social services (LDSS)
- Promoted the use of Alternative Dispute Resolution (mediation) statewide
- Evaluated barriers to kinship adoption and guardianship and developed fact sheets regarding permanency options for kinship caregivers
- Transferred cases from Baltimore City Equity Court to Juvenile Court to address delayed adoptions
- Completed re-codification of guardianship and adoption laws, bringing State law into compliance with ASFA, which also helped to standardize practice across the State

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

**Permanency Outcome 2: The continuity of family relationships and connections is preserved for children**

Permanency Outcome 2 incorporates six items that assess State performance with regard to (1) placing children in foster care near their parents and close relatives (item 11); (2) placing siblings together (item 12); (3) ensuring frequent visitation between children and their parents and siblings in foster care (item 13); (4) preserving connections of children in foster care with extended family, community, cultural heritage, religion, and schools (item 14); (5) seeking relatives as potential placement resources (item 15); and (6) promoting relationships between children and their parents while the children are in foster care (item 16).

Maryland is not in substantial conformity with Permanency Outcome 2. The outcome was substantially achieved in 46.2 percent of the foster care cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 21 percent of applicable Baltimore City cases, 50 percent of applicable Baltimore County cases, and 90 percent of applicable Charles County cases. Items 11 and 12 were rated as Strengths, but items 13, 14, 15, and 16 were rated as Areas Needing Improvement. The 2009 CFSR determined that children were placed in foster care placements that were in close proximity to parents or potential permanent caregivers unless specialized placements were necessary and that children were consistently placed with their siblings. However, key concerns for this outcome in the cases reviewed during the 2009 CFSR were the following:

- Visits with parents and siblings in foster care were not of sufficient quality or quantity to meet the needs of the family.
- Children's connections with extended family, school, and community were not consistently preserved.
- The State was not consistent in making concerted efforts to seek and assess relatives as placement resources.
- The State was not consistent in supporting the parent-child relationship while the child was in foster care.

The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The following concerns were identified in the 2003 review:

- The State did not consistently place siblings together in foster care.
- Visitation between children and their parents or siblings in foster care was not of sufficient quality or quantity to meet the needs of the child.
- The State did not consistently make concerted efforts to preserve children's primary connections.
- The State did not make concerted efforts to seek and assess relatives as placement resources.
- The State did not consistently support and strengthen the parent-child relationship of children in foster care.

To address the identified concerns, the State implemented the following strategies:

- Implemented the Place Matters initiative and the Family-Centered Practice Model, both of which recognize the importance of maintaining family relationships and help to guide child placement decisions
- Passed a State law and implemented policy that requires siblings to be placed in the same home unless it is determined to not be in the best interest of the children, at which time the case record and case plan must contain documentation to justify the separation
- Revised policy and provided training to LDSS staff and foster parents on the importance of family connections and placing sibling together
- Utilized statewide visitation centers and the Kinship Care Resource Center to facilitate visitation, provide a comfortable environment for visitation, preserve family connections, and provide support for relative caregivers

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

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

Well-Being Outcome 1 incorporates four items. One item pertains to State efforts to ensure that the service needs of children, parents, and foster parents are assessed and that the necessary services are provided to meet identified needs (item 17). A second item examines State efforts to actively involve parents and children (when appropriate) in the case planning process (item 18). The two remaining items examine the frequency and quality of caseworker contacts with the children in their caseloads (item 19) and with the children's parents (item 20).

Maryland is not in substantial conformity with Well-Being Outcome 1. The outcome was determined to be substantially achieved in 29.7 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 13 percent of Baltimore City cases, 35 percent of Baltimore County cases, and 53 percent of Charles County cases. The outcome was substantially achieved in 30 percent of the 40 foster care cases and 29 percent of the 24 in-home services cases. All items incorporated into this outcome were rated as Areas Needing Improvement. Key findings for this outcome in the 2009 CFSR were the following:

- The State was not consistent in assessing and meeting the needs of children, foster parents, mothers, and fathers (item 17).
- The State was not consistent in involving parents and children in the case planning process (item 18).
- The State was not consistent in ensuring that the frequency and quality of caseworker visits with children and with parents was sufficient to meet the safety and well-being needs of the children and families (items 19 and 20).

Maryland also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The following concerns were identified in the 2003 review:

- The State was not consistently effective in assessing needs and providing services to children, parents, and foster parents.
- Parents and children were not consistently included in the case planning process.
- The frequency and quality of caseworker contacts with parents was not of sufficient quality or quantity to ensure the children's safety or well-being.

To address the identified concerns, the State implemented the following strategies:

- Implemented the Structured Analysis Family Evaluation home study methodology, which assesses the strengths and needs of foster parents at the time of the home study process
- Implemented the Child and Adolescent Needs and Strengths comprehensive assessment for all children in group care to help develop a plan of care based on the child's profile of strengths and needs
- Implemented the Family-Centered Practice Model and FIMs to increase participation of children and their family members in the permanency and service planning process
- Provided family-centered practice and culturally competent practices training to assist caseworkers in engaging the child and family in case planning

- Issued policy guidelines for visiting children in out-of-home placement to monitor the child’s safety, permanency, and well-being
- Revised policy to require caseworkers to visit with parents in both in-home and out-of-home cases (a minimum of once a month for parents of children in out-of-home care while in-home visitation frequency is based on the assessed level of need)

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

**Well-Being Outcome 2: Children receive appropriate services to meet their educational needs**

Only one item is incorporated under Well-Being Outcome 2. It pertains to State efforts to assess and meet the educational needs of children in foster care and, when relevant, children in the in-home services cases (item 21).

Maryland is not in substantial conformity with Well-Being Outcome 2. The outcome was substantially achieved in 77.1 percent of the cases. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 73 percent of applicable Baltimore City cases, 67 percent of applicable Baltimore County cases, and 93 percent of applicable Charles County cases. The outcome was substantially achieved in 81 percent of the 36 applicable foster care cases and 67 percent of the 12 applicable in-home services cases. The key finding for this outcome in the 2009 CFSR was that the State was not consistently assessing and addressing the educational needs of children.

Maryland also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The key concern identified in the 2003 CFSR was that the State not consistent in its efforts to assess children’s educational needs and provide appropriate services to meet those needs. To address the identified concern, the State:

- Collaborated with the Maryland State Department of Education (MSDE) and local school districts to develop the Access to Education for Children in State-Supervised Care handbook which helps to address common barriers to success in school for foster children.
- Held a summit on educational access issues and solutions which included LDSS, local education, MSDE, advocates and foster parents

The State met its goals for this outcome by the end of it Program Improvement Plan implementation period.

**Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs**

This outcome incorporates two items pertaining to State efforts to assess and meet the physical health (item 22) and mental health (item 23) needs of children in foster care and children in the in-home services cases, if relevant.

Maryland is not in substantial conformity with Well-Being Outcome 3. The outcome was substantially achieved in 71.0 percent of the applicable cases. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 57 percent of applicable Baltimore City cases, 71 percent of applicable Baltimore County cases, and 94 percent of applicable Charles County cases. Also, the outcome was substantially achieved in 75 percent of the 40 foster care cases and 64 percent of the 22 applicable in-home services cases. Item 22 was rated as a Strength and item 23 was rated as an Area Needing Improvement. The key concerns in the 2009 CFSR were that the State was not consistently assessing the mental health of children or providing services to address identified needs.

The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The key concern identified in the 2003 CFSR was that children were being assessed for mental health needs but were not receiving the recommended services to address the identified needs.

To address the identified concern, the State implemented the following strategies:

- Participated in the Transitioning Age Youth Policy Academy sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA) to define and develop a system of care for youth transitioning out of foster care
- Convened a Department of Health and Mental Hygiene (DHMH) and DHR Panel on improving access to care for children in out-of-home placements as well as the Maryland Task Force on Child Welfare Accountability, which issued a report in 2004
- Developed a Health Care Advisory workgroup to improve physical and mental health care for children in foster care
- Conducted a service array assessment to evaluate the accessibility and availability of recommended services for children

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

## **II. KEY FINDINGS RELATED TO SYSTEMIC FACTORS**

### **Statewide Information System**

Substantial conformity with the systemic factor of Statewide Information System is determined by whether the State is operating an information system that can provide accurate and timely information pertaining to the status, demographic characteristics, location, and case goals for the placement of every child in foster care.

Maryland is not in substantial conformity with the systemic factor of Statewide Information System. Item 24 is rated as an Area Needing Improvement. According to stakeholders, MD CHESSIE cannot readily identify the placement location of all children in foster care at any given point in time. This is due to child placement agencies not always informing caseworkers of children's moves in a timely manner. This finding is supported by the results from the Adoption and Foster Care Analysis and Reporting System

(AFCARS) review conducted in July 2008, which indicate that placement information for children was not consistent in 43 percent of the cases reviewed due in part to changes in placement locations not being reported to the State by child placement agencies. The AFCARS review also found that permanency goals were not accurate in 45 percent of the cases reviewed. Additionally, although the DHR/SSA is striving to resolve data issues within MD CHESSIE, at the time of the Onsite Review, the LDSS were required to submit “hand counts” to the DHR/SSA to validate the accuracy of data. The State also was not in substantial conformity with this factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan. The following key concerns were identified in the 2003 CFSR:

- Information on all children in foster care was not readily accessible on a consistent basis.
- The placement location of all children in foster care placed by private agencies under contract with the State was not recorded in the State’s data system.

To address these concerns, the State implemented the following strategies:

- Completed statewide implementation of MD CHESSIE
- Completed training of child welfare staff on MD CHESSIE

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

### **Case Review System**

Five items are included in the assessment of State performance for the systemic factor of Case Review System. The items examine the development of case plans and parent involvement in that process (item 25), the consistency of 6-month case reviews (item 26) and 12-month permanency hearings (item 27), implementation of procedures to seek TPR in accordance with the timeframes established in ASFA (item 28), and notification of foster and pre-adoptive parents and relative caregivers about case reviews and hearings to be held regarding the children in their care and about the opportunity to be heard in those proceedings (item 29).

Maryland is not in substantial conformity with the systemic factor of Case Review System. The key concerns identified in the review were the following:

- Parents’ involvement in case planning remains a challenge for the State (item 25).
- TPR petitions are not being filed in a timely manner, and reasons for not filing are not being documented consistently (item 28).

Despite these concerns, the 2009 CFSR also found the following:

- Periodic reviews of the status of each child in foster care are held at least every 6 months by the court (item 26).
- Permanency hearings are held for each child in a timely manner (item 27).
- The State generally ensures that caregivers receive written notice of hearings involving children in their care and that caregivers have the opportunity to be heard in hearings involving children in their care (item 29).

Maryland also was not in substantial conformity with this systemic factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan. The following key concerns were identified in the 2003 CFSR:

- Parents were not consistently involved in the case planning process.
- Permanency hearings were not held in a timely manner.
- Notification of foster parents about hearings and reviews was not consistent, nor were foster parents provided an opportunity to have input into court hearings.
- There were multiple barriers to achieving timely TPR, including a lack of effort on the part of DHR/SSA to identify absent parents, particularly fathers, early on in cases.

To address these concerns, the State implemented the following strategies:

- Developed a family-centered practice framework that included family engagement, family team meetings, concurrent permanency planning, and family and community involvement in the case planning process
- Implemented a “Best Practice” manual developed by the Foster Care Court Improvement Program, which includes a policy on Continuance and Postponements to improve timeliness of permanency, and revised the Absent Parent Identification Litany used to assist with early identification of parents
- Issued policy about notification of caregivers and a standardized letter to be sent as notification of hearings to caregivers
- Provided training to available judges, attorneys, and LDSS staff on the requirement to notify caregivers of hearings and the requirement to provide them the opportunity to be heard
- Conducted assessments to determine the extent to which court caseloads and resource limitations affect judicial performance

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

### **Quality Assurance System**

Performance with regard to the systemic factor of Quality Assurance (QA) System is based on whether the State has developed standards that ensure the safety and health of children in foster care (item 30) and whether the State is operating a statewide QA system that evaluates the quality and effectiveness of services and measures program strengths and areas needing improvement (item 31).

Maryland is not in substantial conformity with the systemic factor of QA System. The key concern of the 2009 CFSR was that although the State has a QA system, the Statewide Assessment and stakeholders indicated that the current process is not effective in addressing key issues or providing timely feedback on key findings (item 31).

Despite these concerns, the 2009 CFSR also found that Maryland has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of children (item 30).

The State also was not in substantial conformity with this factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan. The key concern identified in the 2003 CFSR was that the State's primary QA system only monitored for compliance and did not provide feedback on the quality of services or outcomes.

To address this concern, the State implemented the following strategies:

- Consulted with the National Resource Center on Organizational Improvement to revise the QA system
- Implemented the MD-CFSR process, modeled after the Federal CFSR, including descriptive analyses in the form of final reports, and used the results of the reports to develop Program Implementation Plans at the local levels, which are monitored by DHR/SSA
- Trained available QA team on the MD-CFSR process
- Implemented the Local Supervisory Review (LSR) instrument and process for monthly review of a sample of cases
- Conducted training for available QA staff and LDSS supervisors on the use of the LSR instruments
- Implemented a local department self-assessment process that incorporates national standards data, demographics, community resources and services, organizational structure and county-specific information
- Collaborated with the Citizen Review Board to create a process that is streamlined and reduces duplication of QA assessments

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

### **Staff and Provider Training**

The systemic factor of Staff and Provider Training incorporates an assessment of the State's training provided to new caseworkers (item 32), the ongoing training provided to agency staff (item 33), and both initial and ongoing training provided to foster and adoptive parents (item 34). This systemic factor does not assess the training of service providers other than child welfare agency staff unless the service providers are private agency caseworkers operating under a contract with the State who have full case management responsibilities.

Maryland is in substantial conformity with the systemic factor of Staff and Provider Training. Key findings for this systemic factor in the 2009 CFSR were the following:

- The State provides competency-based child welfare training to new caseworkers and ensures that caseworkers are trained on relevant issues prior to assuming a full caseload. Caseworkers are required to pass a knowledge test at the completion of each training module, and the State tracks completion of modules and performance on the knowledge test (item 32).
- The State requires 12 hours of ongoing training for all caseworkers and supervisors. Ongoing training is provided primarily by the Child Welfare Academy and community and State resources and tracked by the LDSS (item 33).

- The State provides initial and ongoing training for foster and adoptive parents and has training requirements for private agency foster homes and group care facility staff that are monitored by the DHR Office of Licensing and Monitoring (item 34).

The State also was in substantial conformity with this factor in its 2003 CFSR and was not required to address this factor in its Program Improvement Plan.

### **Service Array and Resource Development**

The assessment of the systemic factor of Service Array and Resource Development incorporates answers to three questions: Does the State have in place an array of services that meet the needs of children and families served by the child welfare agency (item 35)? Are the services accessible to families and children throughout the State (item 36)? Can services be individualized to meet the unique needs of the children and family served by the child welfare agency (item 37)?

Maryland is not in substantial conformity with the systemic factor of Service Array and Resource Development. Key concerns of the 2009 CFSR were the following:

- The services provided by the State are not accessible to families and children in all jurisdictions. There are waiting lists for key services such as dental, substance abuse treatment, and housing services (item 36).
- The services and supports to families that are available in the State are not always tailored to meet the individualized needs of children and families. A specific concern pertained to gender-specific and culturally appropriate services and supports (item 37).

Despite these concerns, the 2009 CFSR also found that Maryland has an array of services that address the safety, permanency, and well-being needs of children and families (item 35).

The State also was not in substantial conformity with this factor in its 2003 CFSR and was required to address this factor in its Program Improvement Plan. The following key concerns were identified in the 2003 CFSR:

- The State had critical gaps in its service array, including dental and mental health services, substance abuse treatment, bilingual services, and services for youth transitioning from residential facilities and to independence.
- Services were not consistently accessible to children and families on a statewide basis.
- Urban communities had a wider array of services than rural communities; however, even in urban communities there were significant service gaps, particularly with regard to dental and mental health services.

To address these concerns, the State implemented the following strategies:

- Trained available caseworkers, foster parents, and providers on identifying services needed by youth to transition to independence
- Provided LDSS staff training on “Provision of Service to Clients with Limited English Proficiency” and provided translation resources accessible to staff

- Collaborated with stakeholders and LDSS staff on mental health and substance abuse issues and services
- Collaborated with the National Resource Center for Organizational Improvement to assess the child and family service array and developed a plan to improve quality and accessibility of services so that each LDSS developed a Resource Development Plan to address needs in the jurisdiction
- Identified and trained available staff to conduct service array assessments

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

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

Performance with regard to the systemic factor of Agency Responsiveness to the Community incorporates an assessment of the State's consultation with external stakeholders in developing the CFSP and producing annual reports (items 38 and 39) and the extent to which the State coordinates child welfare services with services or benefits of other Federal or Federally-assisted programs serving the same population (item 40).

Maryland is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. Key findings for this factor in the 2009 CFSR were the following:

- The State has worked cooperatively with stakeholders including providers, consumers, and government agencies to implement the goals and objectives of the CFSP (item 38).
- The Annual Progress and Services Report (APSR) is completed with input from various stakeholders (item 39).
- The State coordinates services with other Federal and Federally-assisted programs (item 40).

Maryland also was in substantial conformity with this systemic factor in its 2003 CFSR and was not required to address the factor in its Program Improvement Plan.

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

The assessment of this systemic factor focuses on the State's standards for foster homes and child care institutions (items 41 and 42), the State's compliance with Federal requirements for criminal background checks for foster and adoptive parents (item 43), the State's efforts to recruit foster and adoptive parents that reflect the ethnic and racial diversity of foster children (item 44), and the State's activities with regard to using cross-jurisdictional resources to facilitate permanent placements for waiting children (item 45).

Maryland is not in substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention. The key concerns identified in the review were the following:

- The State does not consistently apply the same standards to all approved foster homes or child care institutions. The State was found not to be in substantial compliance with Federal child and provider eligibility requirements during the recent Title IV-E Eligibility Review due to children being placed in foster homes prior to the completion of CPS clearances on adults in the home (item 42).
- The State does not effectively utilize State and national adoption exchanges or the Interstate Compact on the Placement of Children (ICPC) to obtain placements for children across counties and outside the State (item 45).

Despite these concerns, the 2009 CFSR also found the following:

- The State has comprehensive written regulations and standards for foster family homes and child care institutions in place (item 41).
- The State provides for background checks and fingerprinting as a component for all licensed foster and adoptive placements, including relatives and child care institution staff (item 43).
- The State has an identifiable statewide recruitment plan, “1000 by 10.” Additionally, each LDSS has a recruitment plan that is monitored by the DHR/SSA (item 44).

The State was in substantial conformity with this factor in its 2003 CFSR and was not required to address this factor in its Program Improvement Plan.

**Table 1. Maryland 2009 CFSR Ratings for Safety and Permanency Outcomes and Items**

Outcomes and Indicators	Outcome Ratings			Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved*	Met National Standards?	Rating**	Percent Strength
<b>Safety Outcome 1:</b> Children are, first and foremost, protected from abuse and neglect	No	69.6	1 Yes; 1 No		
Item 1. Timeliness of investigations				ANI	73
Item 2. Repeat maltreatment				ANI	89
<b>Safety Outcome 2:</b> Children are safely maintained in their homes when possible and appropriate	No	40.6			
Item 3. Services to protect children in home				ANI	49
Item 4. Risk of harm				ANI	44
<b>Permanency Outcome 1:</b> Children have permanency and stability in their living situations	No	22.5	4 No		
Item 5. Foster care reentry				Strength	92
Item 6. Stability of foster care placements				ANI	75
Item 7. Permanency goal for child				ANI	50
Item 8. Reunification, guardianship, and placement with relatives				ANI	40
Item 9. Adoption				ANI	13
Item 10. Other planned living arrangement				ANI	56
<b>Permanency Outcome 2:</b> The continuity of family relationships and connections is preserved	No	46.2			
Item 11. Proximity of placement				Strength	100
Item 12. Placement with siblings				Strength	96
Item 13. Visiting with parents and siblings in foster care				ANI	37
Item 14. Preserving connections				ANI	71
Item 15. Relative placement				ANI	76
Item 16. Relationship of child in care with parents				ANI	43

\* 95 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

\*\* Items may be rated as Strengths or as Areas Needing Improvement (ANI). For an overall rating of Strength, 90 percent of the cases must be rated as a Strength.

**Table 2. Maryland 2009 CFSR Ratings for Child and Family Well-Being Outcomes and Items**

Outcomes and Indicators	Outcome Ratings		Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved	Rating**	Percent Strength
<b>Well-Being Outcome 1:</b> Families have enhanced capacity to provide for children's needs	No	29.7		
Item 17. Needs/services of child, parents, and foster parents			ANI	34
Item 18. Child/family involvement in case planning			ANI	31
Item 19. Caseworker visits with child			ANI	56
Item 20. Caseworker visits with parents			ANI	24
<b>Well-Being Outcome 2:</b> Children receive services to meet their educational needs	No	77.1		
Item 21. Educational needs of child			ANI	77
<b>Well-Being Outcome 3:</b> Children receive services to meet their physical and mental health needs	No	71.0		
Item 22. Physical health of child			Strength	91
Item 23. Mental/behavioral health of child			ANI	69

\* 95 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

\*\* Items may be rated as Strengths or as Areas Needing Improvement (ANI). For an overall rating of Strength, 90 percent of the cases reviewed for the item (with the exception of item 21) must be rated as a Strength. Because item 21 is the only item for Well-Being Outcome 2, the requirement of a 95-percent Strength rating applies.

**Table 3. Maryland 2009 CFSR Ratings for Systemic Factors and Items**

<b>Systemic Factors and Items</b>	<b>Substantial Conformity?</b>	<b>Score*</b>	<b>Item Rating**</b>
<b>Statewide Information System</b>	No	2	
Item 24. The State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or, within the immediately preceding 12 months, has been) in foster care			ANI
<b>Case Review System</b>	No	2	
Item 25. The State provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions			ANI
Item 26. The State provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review			Strength
Item 27. The State provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter			Strength
Item 28. The State provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act			ANI
Item 29. The State provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child			Strength
<b>Quality Assurance System</b>	No	2	
Item 30. The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children			Strength
Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented			ANI
<b>Staff and Provider Training</b>	Yes	4	
Item 32. The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services			Strength
Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP			Strength
Item 34. The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children			Strength

<b>Systemic Factors and Items</b>	<b>Substantial Conformity?</b>	<b>Score*</b>	<b>Item Rating**</b>
<b>Service Array and Resource Development</b>	No	2	
Item 35. The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency			Strength
Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP			ANI
Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency			ANI
<b>Agency Responsiveness to the Community</b>	Yes	4	
Item 38. In implementing the provisions of the CFSP, the State engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP			Strength
Item 39. The agency develops, in consultation with these representatives, Annual Progress and Services Reports delivered pursuant to the CFSP			Strength
Item 40. The State's services under the CFSP are coordinated with services or benefits of other Federal or Federally-assisted programs serving the same population			Strength
<b>Foster and Adoptive Parent Licensing, Recruitment, and Retention</b>	No	2	
Item 41. The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards			Strength
Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds			ANI
Item 43. The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children			Strength
Item 44. The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed			Strength
Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children			ANI

\* Scores range from 1 to 4. A score of 1 or 2 means that the factor is not in substantial conformity. A score of 3 or 4 means that the factor is in substantial conformity. \*\* Items may be rated as Strengths or as Areas Needing Improvement (ANI).

**Final Report**  
**Maryland Child and Family Services Review**  
**January 2010**

**U.S. Department of Health and Human Services**  
**Administration for Children and Families**  
**Administration on Children, Youth and Families**  
**Children's Bureau**

## INTRODUCTION

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Maryland. The CFSR is the Federal Government's program for assessing the performance of State child welfare agencies with regard to achieving positive outcomes for children and families. It is authorized by the Social Security Amendments of 1994 requiring the Department of Health and Human Services (HHS) to promulgate regulations for reviews of State child and family services programs under titles IV-B and IV-E of the Social Security Act. The CFSR is implemented by the Children's Bureau of the Administration for Children and Families within HHS.

The Maryland CFSR was conducted the week of June 15, 2009. The period under review for the onsite case review process was from April 1, 2008, through June 19, 2009. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the Maryland Department of Human Resources/Social Services Administration (DHR/SSA)
- The State Data Profile, prepared by the Children's Bureau, which provides data for Fiscal Year (FY) 2008 (for the permanency-related measures) and for the 12-month period from July 1, 2007, through June 30, 2008 (for the safety-related measures)
- Reviews of 64 cases (40 foster care and 24 in-home services cases) at three sites: 30 cases in Baltimore City, 17 cases in Baltimore County, and 17 cases in Charles County<sup>1</sup>
- Interviews and focus groups (conducted at all three sites and at the State level) with stakeholders including, but not limited to, children, youth, parents, foster and adoptive parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, child advocates, Tribal representatives, and attorneys

All 64 cases were open child welfare agency cases at some time during the period under review. The key characteristics of the children in the cases reviewed are presented in the table at the end of this section. For this table, and for other tables in the report, figures displayed may not total 100 percent due to rounding.

The first section of the report (Section A: Outcomes) presents the CFSR findings relevant to the State's performance in achieving specified outcomes for children in the areas of safety, permanency, and well-being. The second section of the report (Section B: Systemic Factors) provides an assessment and discussion of the systemic factors relevant to the child welfare agency's ability to achieve positive outcomes for children.

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<sup>1</sup> Originally there were 25 in-home services cases. However, one in-home services case was found to be ineligible for the CFSR because the child was in foster care for over 48 hours during the period under review.

### Key Characteristics of Cases Reviewed

<b>Case Characteristics</b>	<b>Foster Care</b>	<b>In-Home Services</b>
<b>Total Number of Cases</b>	<b>40</b>	<b>24</b>
<b>Date case was opened</b>		
Open prior to the period under review	32 (80%)	6 (25%)
Open during the period under review	8 (20%)	18 (75%)
<b>Child entered foster care during the period under review</b>	12 (30%)	NA
<b>Child's age at start of period under review</b>		
Younger than 10	19 (47.5%)	*
At least 10 but younger than 13	5 (12.5%)	*
At least 13 but younger than 16	8 (20%)	*
16 and older	8 (20%)	*
<b>Race/Ethnicity</b>		
American Indian/Alaskan Native Non-Hispanic	0	*
Asian Non-Hispanic	0	*
Black Non-Hispanic	30 (75%)	*
Hawaiian/Pacific Islander Non-Hispanic	0	*
Hispanic (of any race)	0	*
White Non-Hispanic	9 (22.5%)	*
Unknown/Unable to Determine	0	*
Two or More Races Non-Hispanic	1 (2.5%)	*
<b>Primary reason for opening case</b>		
Physical abuse	11 (27.5%)	3 (12.5%)
Sexual abuse	3 (7.5%)	1 (4%)
Emotional maltreatment	0	0
Neglect (not including medical neglect)	16 (40%)	8 (33%)
Medical neglect	0	2 (8%)
Abandonment	2 (5%)	0
Mental/physical health of parent	1 (2.5%)	2 (8%)
Mental/physical health of child	0	1 (4%)
Substance abuse by parent	3 (7.5%)	3 (12.5%)
Child's behavior	3 (7.5%)	3 (12.5%)
Domestic violence in child's home	0	0
Child in juvenile justice system	1 (2.5%)	0
Other	0	1 (4%)

\*Information on in-home services cases is not available for these characteristics.

## SECTION A: OUTCOMES

In the Outcomes Section of the CFSR Final Report, an overall rating of Strength or Area Needing Improvement is assigned to each of the 23 items reviewed. An item is assigned an overall rating of Strength if 90 percent or more of the applicable cases reviewed were rated as a Strength. The item ratings are used to determine the performance of a State on the seven outcomes, each of which incorporates one or more of the individual items. The evaluation options for these outcomes are “substantially achieved,” “partially achieved,” and “not achieved.” For a State to be in substantial conformity with a particular outcome, 95 percent or more of the applicable cases reviewed must be rated as having substantially achieved the outcome. Two outcomes—Safety Outcome 1 and Permanency Outcome 1—also are evaluated based on State performance with regard to six national data indicators. For a State to be in substantial conformity with these outcomes, both the national standards for each data indicator and the case review requirements must be met. A State that is not in substantial conformity with a particular outcome must develop and implement a Program Improvement Plan to address the areas of concern identified for that outcome.

The Children’s Bureau has established very high standards of performance for the CFSR. The standards are based on the belief that because child welfare agencies work with our nation’s most vulnerable children and families, only the highest standards of performance should be considered acceptable. The standards are set high to ensure ongoing attention to achieving positive outcomes for children and families with regard to safety, permanency, and well-being. This is consistent with the goal of the CFSR to promote continuous improvement in performance on these outcomes.

It should be noted, however, that States are not required to attain the 95-percent standard established for the CFSR Onsite Review or the national standards for the six data indicators by the end of their Program Improvement Plan implementations. The Children’s Bureau recognizes that the kinds of systemic and practice changes necessary to bring about improvement in particular outcome areas often take time to implement. Also, improvements are likely to be incremental rather than dramatic. Instead, States work with the Children’s Bureau to establish a specified amount of improvement or to determine specified activities for their Program Improvement Plans. That is, for each outcome that is not in substantial conformity or item that is rated as an Area Needing Improvement, each State (working in conjunction with the Children’s Bureau) specifies the following: (1) how much improvement the State will demonstrate and/or the activities that it will implement to address the Areas Needing Improvement and (2) the procedures for demonstrating the achievement of these goals. Both the improvements specified and the procedures for demonstrating improvement vary across States. Therefore, a State can meet the requirements of its Program Improvement Plan and still not perform at the 95-percent (for outcomes) or the 90-percent (for items) levels established for the CFSR.

The second round of the CFSR assesses a State’s current level of performance by once more applying the high standards and a consistent, comprehensive, case review methodology. The results of this effort are intended to serve as the basis for continued Program Improvement Plans addressing areas in which a State still needs to improve, even though prior Program Improvement Plan goals may have been achieved. The purpose is to ensure that program improvement is an ongoing process and does not end with the completion of a Program Improvement Plan.

The following sections provide information on how Maryland performed on each outcome in the first round of the CFSR as well as the current CFSR. If the outcome was not substantially achieved during the first round, the key concerns observed at that time and the strategies implemented in the Program Improvement Plan to address those concerns are discussed.

Because many changes were made in the CFSR process based on lessons learned during the first round and in response to feedback from the child welfare field, a State’s performance in the second round of the CFSR is not directly comparable to its performance in the first round, particularly with regard to comparisons of data indicators or percentages regarding Strength and Area Needing Improvement ratings. Key changes in the CFSR case review process that make it difficult to compare performance across reviews include, but are not limited to, the following:

- An increase in the sample size from 50 to 65 cases
- Stratification of the sample to ensure a minimum number of cases in key program areas, resulting in variations in the number of cases relevant for specific outcomes and items
- Changes in criteria for specific items to enhance consistency and ensure an assessment of critical areas such as child welfare agency efforts to involve noncustodial parents in planning for their children

For each outcome, there is a table presenting the data for the case review findings and national indicators (when relevant). The table is followed by a discussion of Maryland’s status with regard to substantial conformity with the outcome at the time of the State’s first CFSR report, which was held in November 2003, the State’s status relevant to the current review, and a presentation and discussion of each item (indicator) assessed under the outcome. Performance of individual sites included in the Onsite Review is presented in the tables. Variations in outcome and item ratings as a function of type of case (i.e., foster care or in-home services) also are identified when appropriate.

## I. SAFETY

### Safety Outcome 1

<b>Outcome S1: Children are, first and foremost, protected from abuse and neglect</b>					
<b>Number of Cases Reviewed by the Team According to Degree of Outcome Achievement</b>					
<b>Degree of Outcome Achievement</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Substantially Achieved	6	7	3	16	<b>69.6</b>
Partially Achieved	5	0	1	6	<b>26.1</b>
Not Achieved	1	0	0	1	<b>4.3</b>
<b>Total Applicable Cases</b>	<b>12</b>	<b>7</b>	<b>4</b>	<b>23</b>	
Not Applicable Cases	18	10	13	41	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Substantially Achieved by Site</b>	<b>50%</b>	<b>100%</b>	<b>75%</b>		

<b>Conformity of Statewide Data Indicators With National Standards</b>			
<b>National Data Indicators</b>	<b>National Standard (%)</b>	<b>State's Percentage</b>	<b>Meets Standards?</b>
Absence of maltreatment recurrence	94.6+	94.3	No
Absence of maltreatment of children in foster care by foster parents or facility staff	99.68+	99.78	Yes

### **Status of Safety Outcome 1**

Maryland is not in substantial conformity with Safety Outcome 1. The outcome was substantially achieved in 69.6 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. Additionally, Maryland did not meet the national standard for the measure assessing the absence of maltreatment recurrence. However, the State did meet the national standard for the measure assessing absence of maltreatment of children in foster care. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

### **Key Concerns From the 2003 CFSR**

The primary concern identified in the 2003 review was the State was not effective in preventing maltreatment recurrence.

To address the identified concern, the State implemented the following strategies:

- Implemented Risk-Based Service Planning training to strengthen caseworkers' skills in assessing risk and safety and in developing appropriate plans based on the assessment findings
- Implemented new policy on critical incident response and addressing multiple referrals on the same family
- Revised policy to ensure that safety and risk issues were assessed and addressed prior to case closure and that families were linked to community resources to support the families once closure occurred
- Reviewed and revised policies related to aftercare services and the development of aftercare service plans to ensure that appropriate services and plans were in place to support families once agency involvement was discontinued

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

### **Key Findings of the 2009 CFSR**

The findings pertaining to the specific items assessed under Safety Outcome 1 are presented and discussed below.

#### **Item 1. Timeliness of initiating investigations of reports of child maltreatment**

Strength       Area Needing Improvement

### Case Review Findings

The assessment of item 1 was applicable for 22 (34 percent) of the 64 cases. Cases were not applicable when there were no child maltreatment reports during the period under review. In assessing item 1, reviewers were to determine whether the response to a maltreatment report occurring during the period under review had been initiated in accordance with the State child welfare agency policy requirements.

Maryland policy establishes the following timeframes for local departments of social services (LDSS) with regard to initiating an onsite investigation of child abuse or neglect, including establishing face-to-face contact with the child:

- 24-hour response: An investigation of a report of child physical or sexual abuse must be initiated within 24 hours of receiving the report.
- 5-day response: An investigation of suspected neglect or suspected mental injury must be initiated within 5 days of receiving the report.
- Immediate response: An investigation of a report involving imminent danger to the child must be initiated within a maximum of 30 minutes of receiving the report.

The results of the assessment of item 1 are presented in the table below.

Item 1 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	7	6	3	16	73
Area Needing Improvement	5	0	1	6	27
<b>Total Applicable Cases</b>	<b>12</b>	<b>6</b>	<b>4</b>	<b>22</b>	
Not Applicable	18	11	13	42	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>58%</b>	<b>100%</b>	<b>75%</b>		

Item 1 was rated as a Strength in 16 cases when the investigation was initiated and face-to-face contact was made within the timeframes required by State policy. It was rated as an Area Needing Improvement in six cases when the investigation was not initiated within the required timeframes. The six cases rated as an Area Needing Improvement included seven reports that were not investigated in a timely manner. Of these seven reports, two reports were assigned as an immediate response, four reports were assigned as 24-hour response, and one report was assigned as a 5-day response.

### Rating Determination

Item 1 was assigned an overall rating of Area Needing Improvement. In 73 percent of the applicable cases, reviewers determined that the agency had initiated an investigation of a maltreatment report in accordance with required timeframes. This percentage is less than the 90 percent required for a rating of Strength. Item 1 was rated as Strength in Maryland's 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, Maryland Family Law and the Code of Maryland Regulations require that a caseworker from the LDSS and/or a law enforcement officer initiate an investigation of allegations of suspected physical and sexual abuse. Sexual abuse referrals must be investigated jointly by a caseworker and a law enforcement officer. The Statewide Assessment reports that Structured Decision Making for Child Protective Screening helps screening staff identify situations for prioritizing referrals. Supervisors review and approve every assignment decision.

Data reported in the Statewide Assessment indicate that 88 percent of the 7,307 investigations conducted between June 4, 2008, and October 2, 2008, were initiated within 5 days. Additionally, the Local Supervisory Review (LSR) found that 96 percent of the alleged victims in the 162 cases reviewed were seen face-to-face during the investigation. The LSR also found that when an alleged victim was not seen, there was a documented attempt to make face-to-face contact in 96 percent of the cases. The Statewide Assessment notes that the LSR is a compliance tool used by local supervisory staff, local review boards, and child protection panels to ensure that proper case decisions are made.

### Stakeholder Interview Information

Stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State generally responds to reports of abuse and neglect in a timely manner. Several stakeholders noted that law enforcement agencies generally accompany caseworkers on physical and sexual abuse cases.

### Item 2. Repeat maltreatment

Strength       Area Needing Improvement

### Case Review Findings

The assessment of item 2 was applicable for 18 (28 percent) of the 64 cases. Cases were not applicable for this item if there was no substantiated or indicated maltreatment report during the period under review. For all applicable cases, reviewers were to determine if there had been a substantiated or indicated maltreatment report on the family during the period under review, and, if so, whether another substantiated or indicated report involving similar circumstances had occurred within a 6-month period before or after that identified report. The results of the assessment of item 2 are presented in the table below.

Item 2 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	7	6	3	16	89
Area Needing Improvement	2	0	0	2	11
<b>Total Applicable Cases</b>	<b>9</b>	<b>6</b>	<b>3</b>	<b>18</b>	
Not Applicable	21	11	14	46	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>78%</b>	<b>100%</b>	<b>100%</b>		

Item 2 was rated as a Strength in 16 cases when there was only one substantiated or indicated maltreatment report on the family within a 6-month period. Item 2 was rated as an Area Needing Improvement in two cases when there were at least two substantiated maltreatment reports on the family within a 6-month period. In one case the reports were 2 months apart, and in the other case the reports were 6 months apart. In one case rated as a Strength reviewed during the Onsite Review, a new incident of child maltreatment occurred while the case was open; however, a formal report was not made and therefore there was no formal investigation of the allegations.

In addition to the recurrence of substantiated maltreatment reports, reviewers reported the following findings with regard to the number of maltreatment reports on the family during the life of the case (“life of the case” refers to the time from the date of the first allegation of abuse or neglect to the time of the Onsite Review):

- In 33 cases, there were fewer than 3 reports.
- In 20 cases, there were at least three reports but fewer than seven reports.
- In eight cases, there were between 7 and 10 reports.
- In three cases, there were 11 or more maltreatment reports.

### **Rating Determination**

Item 2 was assigned an overall rating of Area Needing Improvement. In 89 percent of the applicable cases, there was no recurrence of substantiated or indicated maltreatment within a 6-month period. This percentage is less than the 90 percent required for a rating of Strength. Item 2 also was rated as an Area Needing Improvement in Maryland’s 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, DHR/SSA policy requires that a referral containing new information received within 120 days of a prior referral must be reviewed by both the supervisor and administrator or by the local screening team. This review should occur as soon as possible but no later than 5 days after the last report to the agency. If there is a referral on an active, in-home service case, the investigation usually is assigned to the previously assigned investigation caseworker. The Statewide Assessment notes that In-Home Service caseworkers do not conduct the investigation of reports on open cases.

As reported in the Statewide Assessment, State policy requires that all safety concerns must be addressed prior to a case being considered for case closure. Additionally, a safety and risk assessment must be completed prior to case closure. Any case with a risk factor determined to be “high” or “moderate” is not to be considered for case closure. Despite these policy requirements, the Statewide Assessment indicates that stakeholders interviewed during the Statewide Assessment process identified maltreatment recurrence as a continuing problem in some areas of the State, and they attributed maltreatment recurrence to the scarcity of services available to families and the frequent practice of closing cases without addressing all of the maltreatment issues.

The Statewide Assessment notes that the State has developed a case review quality assurance (QA) process, the Maryland-Child and Family Services Review (MD-CFSR). The MD-CFSR has adopted the format and outcome assessments of the Federal CFSR.

According to the Statewide Assessment, 20 percent of the 30 cases reviewed between July 2007 and June 2008 had repeat maltreatment.

In Maryland, there are three possible findings for a maltreatment report: “indicated,” which means that there is sufficient evidence to support a finding of abuse or neglect; “unsubstantiated,” which means that there is insufficient evidence to support a finding of indicated or ruled out; and “ruled out,” which means that a finding of abuse or neglect did not occur.

### Stakeholder Interview Information

A few stakeholders in Baltimore County commenting on this item during the onsite CFSR expressed the opinion that maltreatment recurrence is a concern.

### Safety Outcome 2

<b>Outcome S2: Children are safely maintained in their homes whenever possible and appropriate</b>					
<b>Number of Cases Reviewed by the Team According to Degree of Outcome Achievement</b>					
<b>Degree of Outcome Achievement</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Substantially Achieved	7	8	11	26	<b>40.6</b>
Partially Achieved	5	1	3	9	<b>14.1</b>
Not Achieved	18	8	3	29	<b>45.3</b>
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Substantially Achieved by Site</b>	<b>23%</b>	<b>47%</b>	<b>65%</b>		

### Status of Safety Outcome 2

Maryland is not in substantial conformity with Safety Outcome 2. The outcome was substantially achieved in 40.6 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

### Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 CFSR:

- The State was inconsistent in providing services to families to prevent placement of children in foster care.
- The State was inconsistent in providing services to families to reduce the risk of harm to children.

To address the identified concerns, the State implemented the following strategies:

- Developed a family-centered practice framework, which includes family engagement, family involvement meetings (FIMs), concurrent permanency planning, and family and community involvement to keep children with family and/or in the community

- Revised policy to ensure safety and risk issues are assessed and addressed prior to case closure and that families are linked to community resources to support the families once the case is closed
- Provided Risk-Based Service Planning training to caseworkers in order to strengthen the skills necessary for identifying and providing the appropriate services to reduce risk and to prevent reentry into foster care
- Implemented the LSR tool, which incorporates monitoring of risk-based service planning and service plan reviews
- Developed guidelines for use of local flexible funds to maintain and support family connections and prevent placement of children in foster care
- Implemented the Mental Health Mobile Crisis and Stabilization Services (MCSS) program, which provides community-based, 24-hour, intensive in-home services to respond to crisis issues and stabilize situations to reduce risk of harm to children

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

### Key Findings of the 2009 CFSR

The findings pertaining to the specific items assessed under Safety Outcome 2 are presented and discussed below.

#### Item 3. Services to family to protect child(ren) in the home and prevent removal or reentry into foster care

Strength       Area Needing Improvement

#### Case Review Findings

An assessment of item 3 was applicable in 39 (61 percent) of the 64 cases. Cases were excluded if the children entered foster care prior to the period under review and there were no other children in the home, or if there was no substantiated or indicated maltreatment report or identified risk of harm to the children in the home during the period under review. For applicable cases, reviewers assessed whether, in responding to a substantiated maltreatment report or risk of harm, the agency made diligent efforts to provide services to families that would prevent placement of children in foster care and at the same time ensure their safety. The results of the assessment of item 3 are presented in the table below.

Item 3 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	7	7	5	19	<b>49</b>
Area Needing Improvement	10	8	2	20	<b>51</b>
<b>Total Applicable Cases</b>	<b>17</b>	<b>15</b>	<b>7</b>	<b>39</b>	
Not Applicable	13	2	10	25	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>41%</b>	<b>47%</b>	<b>71%</b>		

Item 3 was rated as a Strength when reviewers determined the following:

- Although no services were provided when the child was removed from the home, the removal was necessary to ensure the safety of the child (four cases).
- Services were provided to the family to ensure the safety of the child and prevent removal (13 cases).
- Efforts were made to provide services prior to removal and/or reentry (two cases).

Case review information indicates that a range of services was offered or provided to families. This included (but was not limited to) the following: anger management classes, homemaker services, medication monitoring, individual counseling, family counseling, domestic violence intervention, child care, parenting classes, parenting aide, housing assistance, employment training, crisis response team, psychosocial evaluation, flexible funding, and substance abuse evaluation and treatment.

Item 3 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Services were not provided to the family and the children remained at risk in the home (13 cases). In four of these cases the children eventually were removed.
- Services were provided, but they did not target the key safety concern or the underlying issues in the family, leaving the children at risk in the home (five cases).
- Services were not provided after reunification to ensure children's ongoing safety and to prevent reentry (one case).
- No services were provided to ensure the safety of the children who remained in the home (three cases).
- Services were provided to one parent or focused on one child and not provided to the entire family (six cases).

### **Rating Determination**

Item 3 was assigned an overall rating of Area Needing Improvement. In 49 percent of the cases, reviewers determined that the agency had made concerted efforts to maintain children safely in their own homes. This percentage is less than the 90 percent required for a rating of Strength. Item 3 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, the State offers a continuum of programs intended to prevent the removal of children from their homes. These include FIMs as well as a variety of family preservation programs. The Statewide Assessment reports that the 2008 MD-CFSR found that adequate services were provided to the families to protect children in their homes and prevent removal in 94 percent of the applicable cases. However, the Statewide Assessment also reports that the MD-CFSR found that the effort and diligence provided by caseworkers to safely maintain children in their homes varied across jurisdictions. As indicated in the Statewide Assessment, the LSR found that services provided were appropriate to the families' identified needs and risks in 99 percent of the cases reviewed.

### Stakeholder Interview Information

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that DHR/SSA makes concerted efforts to prevent children’s removal from their homes while ensuring their safety. Stakeholders noted that DHR/SSA provides placement prevention in-home services either directly or through contracted service providers.

### Item 4. Risk assessment and safety management

     Strength        X   Area Needing Improvement

### Case Review Findings

An assessment of item 4 was applicable for all 64 cases. In assessing item 4, reviewers were to determine whether the agency had made, or was making, diligent efforts to address the risk of harm to the children involved in each case. The results of the assessment of item 4 are presented in the table below.

Item 4 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	8	8	12	28	44
Area Needing Improvement	22	9	5	36	56
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>27%</b>	<b>47%</b>	<b>71%</b>		

Item 4 was rated as a Strength in 28 cases when reviewers determined that the risk of harm to children was appropriately addressed by the agency by conducting initial and ongoing assessments of risk and safety either in the children’s home or in the children’s foster home and addressing all safety-related concerns identified through the assessment.

Item 4 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- There was no initial safety or risk assessment (two cases).
- There was no ongoing safety and risk assessment in the child’s home during the period under review (five cases).
- There was no ongoing safety and risk assessment in the foster home during the period under review (five cases).
- There were continued risk concerns in the home that were not addressed and/or monitored by the agency, and the children were at risk in the home (eight cases).
- The case was closed or the child was reunified without a safety and risk assessment (four cases).
- There was no ongoing safety plan (two cases).
- There was risk of harm or safety issues during visitation with parents and other relatives and the agency did not address those issues (six cases)

- Reports alleging child maltreatment were inappropriately screened out (one case).
- There was no ongoing safety and risk assessments of children remaining in the home after one or more of the children were removed (five cases).
- Safety and risk assessments, although completed, were not thorough and did not address the underlying issues (10 cases).
- Safety assessments were conducted but risk was not assessed on an ongoing basis (seven cases).
- Safety and risk were assessed but services were not provided to address the concerns (one case).
- A new incident of child maltreatment occurred while the case was open; however, a formal report was not made (one case).

In two foster care cases rated as Area Needing Improvement, case reviewers noted that the foster care caseworker reported that risk is assessed only in child protective services (CPS) cases and that foster care caseworkers do not assess risk formally or informally.

### **Rating Determination**

Item 4 was assigned an overall rating of Area Needing Improvement. In 44 percent of the cases, reviewers determined that the agency had made diligent efforts to assess and address the risk of harm to the child. This percentage is less than the 90 percent required for a rating of Strength. Item 4 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, the department conducts a comprehensive assessment of risk and safety through the use of standardized assessment tools that are designed to assist the caseworker in assessing service needs and to facilitate the service delivery process. Use of these tools requires input from the client and the caseworker as well as supervisory review and approval.

The Statewide Assessment also reports that safety and risk are formally reassessed every 3 months. As indicated in the Statewide Assessment, a March 2008 review of in-home and investigation records revealed that, although caseworkers are in compliance with completing the risk and safety assessments on paper, the data are not always entered into Maryland Children's Electronic Social Services Information Exchange (MD CHESSIE). The Statewide Assessment reports that caseworkers struggle with differentiating between safety and risk and that their lack of clarity around this issue results in ineffective case planning.

The following data on assessing safety and risk was referenced in the Statewide Assessment:

- A review of open investigations in March 2008 found that 63 percent of investigations had the required risk and safety assessment documents recorded in MD CHESSIE.
- The LSR found that adequate safety assessments were completed in 92 percent of the cases, adequate risk assessments were completed in 89 percent of the cases, and safety plans were developed per policy in 95 percent of the cases.
- Item 4 was found to be a Strength in 92 percent of the 144 cases reviewed during the MD-CFSR process.

### Stakeholder Interview Information

Most stakeholders commenting on this item during the onsite CFSR indicated that the agency is effective in conducting safety and risk assessments. Stakeholders reported that the agency provides caseworkers with formal tools to conduct the assessments.

## II. PERMANENCY

### Permanency Outcome 1

<b>Outcome P1: Children have permanency and stability in their living situations</b>					
<b>Number of Cases Reviewed by the Team According to Degree of Outcome Achievement</b>					
<b>Degree of Outcome Achievement</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Substantially Achieved	4	2	3	9	22.5
Partially Achieved	15	7	6	28	70.0
Not Achieved	1	1	1	3	7.5
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Substantially Achieved by Site</b>	<b>20%</b>	<b>20%</b>	<b>30%</b>		

<b>Conformity of Statewide Data Indicators With National Standards</b>			
<b>National Data Indicators</b>	<b>National Standard (Scaled Score)</b>	<b>State Score (Scaled Score)</b>	<b>Meets Standards?</b>
Composite 1: Timeliness and permanency of reunification	122.6+	83.9	No
Composite 2: Timeliness of adoptions	106.4+	78.9	No
Composite 3: Permanency for children in foster care for extended time periods	121.7+	96.8	No
Composite 4: Placement stability	101.5+	95.3	No

### Status of Permanency Outcome 1

Maryland is not in substantial conformity with Permanency Outcome 1. The outcome was substantially achieved in 22.5 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. In addition to case review findings, Maryland did not meet the national standard for any of the national data indicators pertaining to permanency, as shown in the table above. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

## Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 CFSR:

- The State was not consistently effective in preventing reentry into foster care.
- The State was not consistent with regard to ensuring placement stability for children in foster care.
- The State was not consistent with regard to establishing appropriate permanency goals in a timely manner.
- The State did not consistently make concerted efforts to achieve children's permanency goals in a timely manner.
- There were multiple barriers to achieving timely termination of parental rights (TPR), including court continuances, a lack of effort to identify absent parents early on in the case, a lack of sufficient legal and judicial personnel, a requirement that TPR must be granted for both parents at the same time, and a lengthy TPR appeals process.

To address the identified concerns, the State implemented the following strategies:

- Implemented the Maryland Family Risk Assessment (MRFA) to identify family members who have the capacity to address safety, permanency, and well-being concerns for the child and family in order to prevent the child's reentry into foster care
- Implemented the Family-Centered Practice Model (FCPM) and FIMs to help families plan for support to prevent children from coming into foster care and to address potential disruptions by developing plans to maintain placements for children in foster care
- Implemented the Place Matters initiative, which focuses on avoiding temporary shelter placements, placing children in family settings, providing services to maintain placements (respite, day care, MCSS), and minimizing placement changes
- Implemented the "1000 by 10" initiative to ensure that appropriate placements are available for children in foster care
- Developed and implemented statewide recruitment plans to target specific populations and expanded the use of resources such as **AdoptUsKids** (AUK), Public Service Announcements, and Maryland Adoption Resource Exchange (MARE) to identify permanent homes for children in foster care
- Trained caseworkers on conducting and completing Safety Assessment for Every-Child Group Residential Provider safety assessments for children in group care
- Implemented a "Best Practice" manual developed by the Foster Care Court Improvement Project (FCCIP) and the Administrative Office of the Courts to assist the court in establishing timely and appropriate permanency goals and timely processing of cases
- Enacted a court Continuance and Postponement Policy to improve timeliness of permanency and TPR hearings, revised Absent Parent Identification litany used during court hearings to assist with early identification of parents, developed a checklist for Children in Need of Assistance (CINA) and TPR hearings, and incorporated best practices in permanency planning into the court process
- Conducted an examination of the Appellate process, which had presented a barrier to timely TPR
- Revised MD CHESSIE court reports and court orders to provide uniformity in addressing and communicating information in order to increase the establishment of appropriate and timely goals and to improve collaboration and consistency between the courts and LDSS
- Promoted the use of Alternative Dispute Resolution (mediation) statewide

- Evaluated barriers to kinship adoption and guardianship and developed fact sheets regarding permanency options for kinship caregivers
- Transferred cases from Baltimore City Equity Court to Juvenile Court to address delayed adoptions
- Completed re-codification of guardianship and adoption laws, which brought State law into compliance with the Adoption and Safe Families Act (ASFA) and helped to standardize practice across the State

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

### Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Permanency Outcome 1 are presented and discussed below.

#### Item 5. Foster care reentries

  X   Strength             Area Needing Improvement

#### Case Review Findings

An assessment of item 5 was applicable for 12 (30 percent) of the 40 foster care cases. Cases were not applicable if the child did not enter foster care during the period under review. In assessing this item, reviewers determined whether the entry into foster care during the period under review occurred within 12 months of discharge from a prior foster care episode. The results of the assessment of item 5 are presented in the table below.

Item 5 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	4	4	3	11	92
Area Needing Improvement	0	1	0	1	8
<b>Total Applicable Foster Care Cases</b>	<b>4</b>	<b>5</b>	<b>3</b>	<b>12</b>	
Not Applicable Foster Care Cases	16	5	7	28	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>100%</b>	<b>80%</b>	<b>100%</b>		

Item 5 was rated as a Strength in 11 cases when the child’s entry into foster care during the period under review did not take place within 12 months of discharge from a prior episode. Item 5 was rated as an Area Needing Improvement in one case when the child’s entry into foster care occurred less than a month after the date of discharge from a prior foster care placement episode.

### **Rating Determination**

Item 5 was assigned an overall rating of Strength. The item was rated as a Strength in 92 percent of the cases reviewed. This percentage is greater than the 90 percent required for a rating of Strength. Item 5 was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Performance on the Composite 1 Measure Relevant to the Permanency of Reunification**

The data below are presented to provide additional information about foster care reentry. There is no national standard for the measure of foster care reentry. National standards with regard to permanency have been established only for the scaled composite scores. The measure of foster care reentry is part of Composite 1: Timeliness and permanency of reunification. The State's performance on Composite 1 is shown in the table for Permanency Outcome 1.

Maryland's performance on the individual measure of foster care reentry (measure C1.4) included in Composite 1: Timeliness and permanency of reunification was the following: In the 12 months prior to the CFSR 12-month target period for the data indicators, 11.4 percent of children exiting foster care to reunification reentered foster care in less than 12 months from the time of discharge. This percentage is less than the national median of 15.0 percent but greater than the national 25th percentile of 9.9 percent. (For this measure, a lower percentage reflects a higher level of performance.)

### **Statewide Assessment Information**

According to the Statewide Assessment, after a child is returned home to his or her family, the Department continues services to the family and child for a period of up to 6 months in efforts to facilitate a safe and stable reunification. Supportive services noted in the Statewide Assessment include (but are not limited to) in-home visits, referrals to community resources, provision of necessary household items, and provision of wraparound services. The Statewide Assessment reports that stakeholders who participated in the State's Child and Family Services Interagency Strategic planning process commended the use of wraparound services when children are reunified with their families. However, the Statewide Assessment also reports that all wraparound services are not available in every jurisdiction.

As noted in the Statewide Assessment, 2008 MD-CFSR results indicate that all 35 cases reviewed for this item were rated as a Strength.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review expressed the opinion that reentry is occurring, although they did not provide consistent opinions on why reentries occur. A few stakeholders reported that aftercare services usually are provided after reunification.

### **Item 6. Stability of foster care placement**

Strength       Area Needing Improvement

## Case Review Findings

All 40 foster care cases were applicable for an assessment of item 6. In assessing this item, reviewers were to determine whether the child experienced multiple placement settings during the period under review and, if so, whether the changes in placement settings were necessary to achieve the child's permanency goal or meet the child's service needs. Reviewers also assessed the stability of the child's most recent placement setting. The results of the assessment of item 6 are presented in the table below.

Item 6 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	18	6	6	30	75
Area Needing Improvement	2	4	4	10	25
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>90%</b>	<b>60%</b>	<b>60%</b>		

Item 6 was rated as a Strength in 30 cases when reviewers determined that the child's current placement was stable and that the child either did not experience a placement change during the period under review or that the placement changes experienced were in the child's best interests (i.e., they were intended to further achievement of the child's permanency goal or to provide specialized services for the child).

Item 6 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The child was in multiple placement settings during the period under review, and at least one placement change was not planned by the agency to attain the child's permanency goal (10 cases).
- The child's placement setting at the time of the onsite CFSR was not stable (four cases).

Additional findings of the case review were the following:

- Children in 28 cases experienced only one placement during the period under review.
- Children in six cases experienced two placements during the period under review.
- Children in six cases experienced three or more placements during the period under review.

## Rating Determination

Item 6 was assigned an overall rating of Area Needing Improvement. In 75 percent of the cases, reviewers determined that children experienced placement stability. This percentage is less than the 90 percent required for a rating of Strength. Item 6 also was rated as an Area Needing Improvement in the State's 2003 CFSR.

## Performance on the Individual Measures Included in Composite 4: Placement stability

The data below are presented to provide additional information about placement stability. There are no national standards for performance on these measures individually. National standards have been established only for the scaled composite score. The State's performance on Composite 4 is shown in the table for Permanency Outcome 1.

For the target 12-month CFSR period established for the data indicators, Maryland’s performance was the following on the individual measures included in Composite 4: Placement stability:

- C4.1: 82.7 percent of the children in foster care for at least 8 days but less than 12 months experienced two or fewer placement settings. This percentage is less than the national median of 83.3 percent.
- C4.2: 65.3 percent of the children in foster care for at least 12 months but less than 24 months experienced two or fewer placement settings. This percentage is greater than the national median of 59.9 percent but less than the national 75th percentile of 65.4 percent.
- C4.3: 30.2 percent of the children in foster care for at least 24 months experienced two or fewer placement settings. This percentage is less than the national median of 33.9 percent.

### **Statewide Assessment Information**

According to the Statewide Assessment, the primary barrier to placement stability is the lack of appropriate placement resources, particularly for children with special needs, and the lack of resources to support placements. The Statewide Assessment reports that stakeholders who participated in the Child and Family Services Interagency Strategic planning process voiced the concern that placement disruptions occur because children are not adequately assessed when they enter out-of-home placement. The Statewide Assessment also reports that MD-CFSR results indicated that 78 of the 85 cases reviewed for this item were rated as a Strength.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions regarding the State’s effectiveness in providing stable foster care placements for children. Some stakeholders indicated that the State attempts to ensure stable placements for children through initial planning, placement meetings, and FIMs.

Other stakeholders, however, identified the following factors as barriers to achieving placement stability for children in foster care:

- Resource families willing to work with children with mental health and behavioral issues and with older youth are scarce.
- Resource families are not provided the supports or services necessary to maintain placements.
- Placements are sometimes based on the availability of a bed rather than on the skills and training of foster parents.
- Foster parents are not provided pertinent information pertaining to the child prior to placement.

### **Item 7. Permanency goal for child**

Strength       Area Needing Improvement

### **Case Review Findings**

All 40 foster care cases were applicable for an assessment of item 7. In assessing this item, reviewers were to determine whether the agency had established a permanency goal for the child in a timely manner and whether the most current permanency goal was

appropriate. Reviewers also were to determine whether the agency had sought TPR in accordance with the requirements of the ASFA. The results of the assessment of item 7 are presented in the table below.

<b>Item 7 Ratings</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Strength	9	5	6	20	<b>50</b>
Area Needing Improvement	11	5	4	20	<b>50</b>
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>45%</b>	<b>50%</b>	<b>60%</b>		

Item 7 was rated as a Strength in 20 cases when reviewers determined that the child’s permanency goal was appropriate, had been established in a timely manner, and, if relevant, that the agency had filed for TPR in accordance with the requirements of ASFA.

Item 7 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- The child’s permanency goal at the time of the onsite CFSR was not appropriate given the case situation and the needs of the child (six cases).
  - In four cases, the permanency goal was reunification.
  - In one case, the permanency goal was other planned permanent living arrangement (OPPLA).
  - In the sixth case, the permanency goal was adoption.
- The child’s permanency goal was not established in a timely manner (12 cases). In one of the cases, the initial goal was not established within 60 days. In the remaining 11 cases, the goal was not changed in a timely manner.
- The agency had not sought TPR in accordance with the requirements of ASFA, particularly with regard to documenting compelling reasons in the case file for not seeking TPR (11 cases).

ASFA requirements with regard to filing for TPR were met in 45 percent of 20 applicable cases.

The following case goals were identified for the 40 foster care cases:

- Adoption only (12 cases)
- Reunification only (including reunification with relatives) (11 cases)
- Guardianship only (one case)
- OPPLA only (eight cases)
- Concurrent goals of reunification with parents and OPPLA (two cases)
- Concurrent goals of reunification with parents and guardianship (two cases)
- Concurrent goals of adoption and guardianship (two cases)
- Concurrent goals of reunification with parents and reunification with relatives (one case)
- Concurrent goals of adoption, guardianship, and reunification with parents (one case)

In one case, the concurrent goal of reunification was achieved during the period under review; therefore, item 10 pertaining to the concurrent goal of OPPLA was not rated.

### **Rating Determination**

Item 7 was assigned an overall rating of Area Needing Improvement. In 50 percent of the applicable cases, reviewers determined that the agency had established an appropriate permanency goal for the child in a timely manner and had met ASFA requirements. This percentage is less than the 90 percent required for a rating of Strength. Item 7 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Performance on the Individual Measures Included in Composite 3: Permanency for children in foster care for extended time periods**

The data below are presented to provide additional information about permanency for children in foster care for extended time periods. There are no national standards for performance on these measures individually. National standards were established only for the scaled composite score. The State's performance on Composite 3 is shown in the table for Permanency Outcome 1.

For the target 12-month CFSR period established for the data indicators, Maryland's performance on the individual measures included in Composite 3: Permanency for children in foster care for extended time periods was the following:

- C3.1: 13.0 percent of the children in foster care for 24 months or longer at the start of the 12-month CFSR target period were discharged from foster care to a permanent home (adoption, reunification with parents or other relatives, or guardianship) by the end of the target period. This percentage is less than the national median of 25.0 percent.
- C3.2: 98.6 percent of the children exiting foster care during the target period who were legally free for adoption at the time of exit were discharged to a permanent home. This percentage is greater than the national 75th percentile of 98.0 percent.
- C3.3: 60.5 percent of the children who were discharged from foster care during the 12-month target period with a discharge reason of emancipation had been in foster care for 3 years or longer at the time of discharge. This percentage is greater than the national median of 47.8. (For this measure, a lower percentage reflects a higher level of performance.)

### **Statewide Assessment Information**

According to the Statewide Assessment, in most cases, the initial primary permanency goal is reunification, although Maryland uses concurrent planning in all out-of-home cases. The Statewide Assessment notes, however, that the court is vested with the authority to change the primary plan to something other than reunification, and DHR/SSA cannot change the plan until the court agrees during a permanency planning review hearing. When the primary concurrent plan is changed to adoption by the court, DHR/SSA is required to file a petition for TPR within 30 days of the court's review of the permanency plan.

According to the Statewide Assessment, DHR/SSA must verify diligent efforts to identify a permanent placement for the youth in order to recommend the permanency goal of OPPLA. Additionally, the court determines if the permanency plan will be changed to OPPLA after compelling reasons have been made to rule out all other permanency goals.

The Statewide Assessment reports that of the 84 cases reviewed for this item during the FY 2008 MD-CFSR, 87 percent were rated as a Strength.

**Stakeholder Interview Information**

The key issues addressed by stakeholders commenting on this item during the onsite CFSR were whether a goal was appropriate to the needs of the child and whether a petition for TPR was filed in a timely manner.

With regard to appropriateness of goals, some stakeholders indicated that the State generally is effective in establishing an appropriate permanency goal; however, concerns were identified with regard to the court’s willingness to change the goal of reunification or to support the practice of concurrent planning.

With regard to the timeliness of filing for TPR, stakeholders expressed different opinions on the State’s effectiveness in filing for TPR in accordance with the provisions of ASFA. Some stakeholders indicated that DHR/SSA files for TPR when children have been in foster care for 15 of the most recent 22 months or earlier if the case circumstances require it. Other stakeholders, however, reported that DHR/SSA is not filing for TPR in accordance with ASFA requirements. Most stakeholders expressed the opinion that when the agency does not file for TPR, compelling reasons usually are documented in the case plan and presented to the court. Additionally, some judicial circuits will not grant TPR unless there is an identified adoptive resource. Additional information from stakeholders pertaining to the TPR process is provided under items 9 and 28 of this report.

**Item 8. Reunification, guardianship, or permanent placement with relatives**

     Strength        **X**   Area Needing Improvement

**Case Review Findings**

Item 8 was applicable for 20 (50 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine whether the agency had achieved the permanency goals of reunification, guardianship, or permanent placement with relatives in a timely manner or, if the goals had not been achieved, whether the agency had made, or was in the process of making, diligent efforts to achieve the goals. The results of the assessment of item 8 are presented in the table below.

Item 8 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	3	3	2	8	<b>40</b>
Area Needing Improvement	9	2	1	12	<b>60</b>
<b>Total Applicable Foster Care Cases</b>	<b>12</b>	<b>5</b>	<b>3</b>	<b>20</b>	
Not Applicable Foster Care Cases	8	5	7	20	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>25%</b>	<b>60%</b>	<b>67%</b>		

Item 8 was rated as a Strength in eight cases when reviewers determined that the goal had been achieved in a timely manner or that the agency had made concerted efforts to achieve the goal in a timely manner. Item 8 was rated as an Area Needing Improvement in 12 cases when reviewers determined that the agency had not made concerted efforts to achieve reunification or guardianship in a timely manner. Some of the concerns identified pertained to a general lack of effort to achieve reunification and guardianship, including not engaging the parents and not providing services to the parents or potential guardian; reunification remaining the permanency goal for an extended period of time; and the absence of current case plans for parents.

### **Rating Determination**

Item 8 was assigned an overall rating of Area Needing Improvement. In 40 percent of the 20 applicable cases, reviewers determined that the agency had made diligent efforts to attain the goals of reunification, permanent placement with relatives, or guardianship in a timely manner. This percentage is less than the 90 percent required for a rating of Strength. Item 8 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Performance on the Individual Measures Pertaining to Timeliness Included in Composite 1: Timeliness and permanency of reunification**

The data below are presented to provide additional information about the timeliness of reunification. There are no national standards for performance on these measures individually. National standards have been established only for the scaled composite score. The State's performance on Composite 1 is shown in the table for Permanency Outcome 1

For the target 12-month CFSR period established for the data indicators, Maryland's performance on the individual timeliness measures included in Composite 1: Timeliness and permanency of reunification was the following:

- C1.1: 48.1 percent of the reunifications occurred in at least 8 days but less than 12 months of the child's entry into foster care. This percentage is less than the national median of 69.9 percent.
- C1.2: The median length of stay in foster care for children discharged to reunification was 13.0 months. This length of stay is greater than the national median of 6.5 months. (For this measure, a lower number of months reflects a higher level of performance.)
- C1.3: 24.0 percent of children entering foster care in the 6 months prior to the 12-month target period were discharged from foster care to reunification in more than 7 days but less than 12 months of entry into foster care. This percentage is less than the national median of 39.4 percent.

### **Statewide Assessment Information**

According to the Statewide Assessment, 82 percent of the 56 cases reviewed for this item during the MD-CFSR were rated as a Strength. The Statewide Assessment also reports that intensive family services are available to assist with reunification efforts. Additionally, the Statewide Assessment notes that in April 1997, Maryland implemented a State funded Guardianship Subsidy program. As indicated in the Statewide Assessment, when reunification does not occur and adoption is deemed to be inappropriate for the child, relative guardianship is the next option explored.

### Stakeholder Interview Information

The few stakeholders commenting on this item during the onsite CFSR expressed the opinion that DHR/SSA makes concerted efforts to reunify children with their families. However, some stakeholders indicated that that the courts often will grant continuances beyond 12 months in order to provide parents with more time to work toward reunification.

### Item 9. Adoption

     Strength        X   Area Needing Improvement

#### Case Review Findings

Item 9 was applicable for 15 (37.5 percent) of the 40 foster care cases. In assessing this item, reviewers were to determine whether diligent efforts had been, or were being, made to achieve a finalized adoption in a timely manner. The results of the assessment of item 9 are presented in the table below.

Item 9 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	0	0	2	2	13
Area Needing Improvement	9	2	2	13	87
<b>Total Applicable Foster Care Cases</b>	<b>9</b>	<b>2</b>	<b>4</b>	<b>15</b>	
Not Applicable Foster Care Cases	11	8	6	25	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>0</b>	<b>0</b>	<b>50%</b>		

Item 9 was rated as a Strength in two cases when reviewers determined that the State had made diligent efforts to achieve finalized adoptions in a timely manner. Item 9 was rated as an Area Needing Improvement in 13 cases when reviewers identified one or more of the following:

- Delays in filing for TPR (two cases)
- Delays in the TPR process (after filing) (one case)
- Lack of efforts in preparing child for adoption (one case)
- Lack of documentation in the case file regarding the delays in the adoption process (two cases)
- Delays in adoption process due to lack of concerted efforts by agency, including the agency not focusing on the concurrent goal of adoption; lack of efforts to complete adoptive home studies; and agency staffing issues (nine cases)

Additional findings relevant to this item were the following:

- Of the 15 children with a goal of adoption, 5 achieved the goal during the period under review.
- Of the five children who had a finalized adoption during the period under review, one had been in foster care for less than 24 months.

- Of the 10 children with a goal of adoption who were not adopted during the period under review, two had been in foster care for less than 24 months, one had been in foster care for 35 months, two had been in foster care for at least 36 months, one had been in foster care for 66 months, and four had been in foster care for at least 72 months.

### **Rating Determination**

Item 9 was assigned an overall rating of Area Needing Improvement. In 13 percent of the cases, reviewers determined that the agency had made concerted efforts to achieve a finalized adoption in a timely manner. This percentage is less than the 90 percent required for a rating of Strength. Item 9 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Performance on the Individual Measures Included in Composite 2: Timeliness of adoptions**

The data below are presented to provide additional information about the timeliness of adoptions. There are no national standards for performance on these measures individually. National standards have been established only for the scaled composite score. The State's performance on Composite 2 is shown in the table for Permanency Outcome 1.

For the target 12-month CFSR period established for the data indicators, Maryland's performance on the individual measures included in Composite 2: Timeliness of adoptions was the following:

- C2.1: 44.8 percent of the children exiting to adoption were discharged in less than 24 months from the time of entry into foster care. This percentage is greater than the 75th percentile of 36.6 percent.
- C2.2: The median length of stay in foster care for children adopted was 26.9 months. This median length of stay is less than the 75th percentile of 27.3. (For this measure, a lower number of months reflects a higher level of performance.)
- C2.3: 6.0 percent of children who were in foster care for 17 months or longer on the first day of the year were discharged to a final adoption by the last day of the year. This percentage is less than the national median of 20.2 percent.
- C2.4: 1.8 percent of children who were in foster care for 17 months or longer on the first day of the year became legally free for adoption (i.e., there was a TPR for both mother and father) within the first 6 months of the year. This percentage is less than the national median of 8.8 percent.
- C2.5: 53.1 percent of children who were legally free for adoption were adopted within 12 months of becoming legally free. This percentage is greater than the national median of 45.8 percent but less than the 75th percentile of 53.7.

### **Statewide Assessment Information**

As reported in the Statewide Assessment, many children in Maryland are adopted by their foster families, and resource families in the State are approved as both foster and adoptive resources to expedite the adoption process. According to the Statewide Assessment, part of the State's placement protocol is to place children in a placement with a high likelihood of becoming a permanent resource if reunification does not occur.

The Statewide Assessment reports that when the court changes the permanency plan to adoption, DHR/SSA is required to file a petition to TPR within 30 days of the court's decision or within 60 days if SSA does not agree with the court's plan of adoption. The

court must schedule the TPR hearing in lieu of the next permanency plan review hearing. If the TPR is contested, a full hearing is held to determine whether parental rights should be terminated. If uncontested, the court can grant TPR without holding a TPR hearing. Once TPR is granted and if the parents do not appeal, an adoption petition can be filed 30 days after the order for DHR/SSA guardianship is signed. The child must be physically placed in their adoptive placement for 6 months prior to finalization. If an adoptive resource was not identified prior to the TPR, the LDSS must register the child on the MARE within 15 days of DHR/SSA guardianship. The Statewide Assessment reports that many judicial circuits in the State use retired judges and masters to hear TPR matters as a means for managing court dockets and preventing continuances or postponements due to overcrowded dockets.

The Statewide Assessment also reports that the court has the authority to enter an order for adoption for a child in DHR/SSA custody without a separate proceeding to TPR. In these cases the parent consents to the adoption. It was noted in the Statewide Assessment that this process expedites adoptions in certain cases, particularly those involving relative and fictive kin adoptions.

The following data were provided in the Statewide Assessment:

- Of the 9,398 children in foster care during FY 2008, 15.1 percent had adoption as their primary permanency goal.
- In 14 (64 percent) of the 22 cases reviewed during the MD-CFSR for timeliness of adoptions, the adoptions were finalized within 24 months of the child's entry into foster care.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions regarding the State's effectiveness in achieving timely adoptions. A few stakeholders expressed the opinion that the State has made improvements in achieving timely adoptions. According to some stakeholders, the improvements can be attributed primarily to the use of mediation in the TPR process because parents involved in mediation frequently consent to the adoption. Other stakeholders, however, expressed the opinion that the State is not effective in achieving timely adoptions. Stakeholders noted that adoptions often are delayed because of appeals by biological parents to TPR decisions. Several stakeholders reported that in 2006 Baltimore City had a large number of cases waiting for TPR hearings but that the use of retired judges and masters to hear the TPR cases has reduced the backlog.

Stakeholders reported that another barrier to timely adoptions is the child's refusal to consent to the adoption. They noted that in Maryland, the age of consent is 10 years old, and children often say that they do not want to be adopted. Most stakeholders commenting on this issue expressed the opinion that when a child refuses to be adopted, the caseworker continues to discuss adoption with the child as he/she matures. They noted that adoption also is a frequent topic of discussion in therapeutic settings in an attempt to resolve the issues with the child and establish permanency.

### **Item 10. Other planned permanent living arrangement**

Strength       Area Needing Improvement

### Case Review Findings

Item 10 was applicable for 9 (22.5 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine if the agency had made, or was making, diligent efforts to assist children in attaining their goals related to OPPLA. The results of the assessment of item 10 are presented in the table below.

Item 10 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	2	3	0	5	56
Area Needing Improvement	1	0	3	4	44
<b>Total Applicable Foster Care Cases</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>9</b>	
Not Applicable Foster Care Case	17	7	7	31	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>67%</b>	<b>100%</b>	<b>0</b>		

Item 10 was rated as a Strength in five cases when reviewers determined that the agency had made concerted efforts to ensure a long-term placement for the child and/or to provide the necessary service to prepare the child for independent living. Item 10 was rated as an Area Needing Improvement in four cases when reviewers determined one or both of the following:

- The agency had not established a permanent placement for the youth (two cases). In both cases the youth were 16 years old at the beginning of the period under review.
- The agency had not provided adequate services to the youth to prepare for independent living (three cases). In two cases the youth were 16 years old, and in the third case the youth was 17 years old at the beginning of the period under review.

The information below provides data regarding the ages of the children at the time the goal of OPPLA was established.

- Ages 0-12: one case
- Ages 13-15: four cases
- Ages 16 and older: four cases

### Rating Determination

Item 10 was assigned an overall rating of Area Needing Improvement. In 56 percent of the applicable cases, reviewers determined that the goal of OPPLA was being addressed in an appropriate way. This percentage is less than the 90 percent required for a rating of Strength. Item 10 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, State policy requires an individualized independent living (IL) case plan for every youth age 14 or older in out-of-home care, regardless of his or her permanency goal. The caseworker and the youth collaborate to establish a youth-centered case plan that includes services and supports to assist in the transition from foster care to independence.

The following are assessments and services that were noted in the Statewide Assessment as provided to older youth in out-of-home care:

- The Ansell-Casey Assessment tool, which addresses the need for services relevant to achieving self-sufficiency
- Job readiness services, which address the development of skills for meaningful employment
- Information and assistance regarding educational needs

In addition, the Statewide Assessment reports that Ready by 21, which is an initiative supported by the Governor and the Children’s Cabinet, focuses on youth transitioning from adolescence to adulthood. The initiative provides opportunities for youth to attend college and be ready for employment and independent living by age 21. The Statewide Assessment also reports that, although all youth who are in foster are at the time of their 18th birthdays are entitled to receive aftercare services when they leave foster care, feedback provided by stakeholders who participated in the Child and Family Services Interagency Strategic Planning process indicates that there is a lack of support and services for youth aging out of the foster care system.

As noted in the Statewide Assessment, 91 percent of the 32 cases reviewed for this item during the MD-CFSR were rated as a Strength.

### Stakeholder Interview Information

There were no substantive comments from stakeholders on the permanency goal of OPPLA during the Onsite Review.

Stakeholders commenting on this item during the Onsite Review expressed different opinions regarding the State’s effectiveness in providing IL services to youth. A few stakeholders expressed the opinion that the State is providing services to youth to assist in the transition to independence. For example, stakeholders noted the use of the tuition waiver for college and continued Medicaid coverage through the age of 21 for youth who opt to remain in foster care or who choose to leave foster care. Other stakeholders reported that services are not consistently provided and that the State lacks adequate services for youth and young adults transitioning out of foster care.

### Permanency Outcome 2

<b>Outcome P2: The continuity of family relationships and connections is preserved for children</b>					
<b>Number of Cases Reviewed by the Team According to Degree of Outcome Achievement</b>					
<b>Degree of Outcome Achievement</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Substantially Achieved	4	5	9	18	<b>46.2</b>
Partially Achieved	15	5	1	21	<b>53.8</b>
Not Achieved	0	0	0	0	<b>0</b>
Not Applicable Foster Care Case	1	0	0	1	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Substantially Achieved by Site</b>	<b>21%</b>	<b>50%</b>	<b>90%</b>		

One foster care case was determined to be not applicable for Permanency Outcome 2. The child was abandoned as an infant, relatives were explored and ruled out prior to the period under review, TPR occurred prior to the period under review, and the child was placed in an adoptive home prior to the period under review.

### **Status of Permanency Outcome 2**

Maryland is not in substantial conformity with Permanency Outcome 2. The outcome was substantially achieved in 46.2 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

### **Key Concerns From the 2003 CFSR**

The following concerns were identified in the 2003 review:

- The State did not consistently place siblings together in foster care.
- Visitation between children and their parents or siblings in foster care was not of sufficient quality or quantity to meet the needs of the child.
- The State did not consistently make concerted efforts to preserve children's primary connections.
- The State did not make concerted efforts to seek and assess relatives as placement resources.
- The State did not consistently support and strengthen the parent-child relationship of children in foster care.

To address the identified concerns, the State implemented the following strategies:

- Implemented the Place Matters initiative and the FCPM, both of which recognize the importance of maintaining family relationships and help to guide child placement decisions
- Passed a State law and implemented policy that requires siblings to be placed in the same home unless it is determined to not be in the best interests of the children, at which time the case record and case plan must contain documentation to justify the separation
- Revised policy and provided training to LDSS staff and foster parents on the importance of family connections and placing siblings together
- Used statewide visitation centers and the Kinship Care Resource Center to facilitate visitation, provide a comfortable environment for visitation, preserve family connections, and provide support for relative caregivers

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

### **Key Findings of the 2009 CFSR**

The findings pertaining to the items assessed under Permanency Outcome 2 are presented and discussed below.

## Item 11. Proximity of foster care placement

  X   Strength           Area Needing Improvement

### Case Review Findings

Item 11 was applicable for 32 (80 percent) of the 40 foster care cases. Cases were not applicable if TPR was attained prior to the period under review, contact with parents was not considered to be in the child’s best interests, and/or parents were deceased or their whereabouts were unknown. In assessing item 11, reviewers were to determine whether the child’s most current foster care setting was near the child’s parents or close relatives. The results of the assessment of item 11 are presented in the table below.

Item 11 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	16	9	7	32	<b>100</b>
Area Needing Improvement	0	0	0	0	<b>0</b>
<b>Total Applicable Foster Care Cases</b>	<b>16</b>	<b>9</b>	<b>7</b>	<b>32</b>	
Not Applicable Foster Care Cases	4	1	3	8	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>		

Item 11 was rated as a Strength in 15 cases when reviewers determined that the child was placed either in the same community as the parents or near the parents’ community. The item also was rated as a Strength in 17 cases when reviewers determined that even though the child was placed out of his or her community, the placement was necessary to meet the needs of the child and/or support attainment of the permanency goal.

### Rating Determination

Item 11 was assigned an overall rating of Strength. In 100 percent of the cases, reviewers determined that the agency placed children in locations close to their parents or relatives when appropriate. Item 11 also was rated as a Strength in Maryland’s 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, the Place Matters initiative requires that children be placed in their home jurisdiction whenever possible. However, the Statewide Assessment also notes that stakeholders participating in the Child and Family Services Interagency Strategic Planning process indicated that children on Maryland’s Eastern Shore often are placed away from their families due to a lack of foster homes in that area. Additionally, the Statewide Assessment reports that children who have special needs and require treatment facilities often are placed in facilities some distance from their families and/or community of origin.

Despite these concerns, the Statewide Assessment notes that 96 percent of the 70 cases reviewed for this item during the MD-CFSR were rated as a Strength.

### Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the State makes concerted efforts to place children in close proximity to their families.

### Item 12. Placement with siblings

  X   Strength           Area Needing Improvement

### Case Review Findings

Item 12 was applicable for 23 (57.5 percent) of the 40 foster care cases. Cases were not applicable if the child did not have a sibling in foster care at any time during the period under review. In assessing item 12, reviewers were to determine whether siblings were currently or had been placed together, and if separated, whether the separation was necessary to meet the service or safety needs of one or more of the children. The results of the assessment of item 12 are presented in the table below.

Item 12 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	14	2	6	22	96
Area Needing Improvement	0	1	0	1	4
<b>Total Applicable Foster Care Cases</b>	<b>14</b>	<b>3</b>	<b>6</b>	<b>23</b>	
Not Applicable Foster Care Cases	6	7	4	17	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>100%</b>	<b>67%</b>	<b>100%</b>		

Item 12 was rated as a Strength in 22 cases when reviewers determined that the child was placed with siblings, or that the separation of siblings was necessary because one of the siblings had special placement needs or because placement with siblings was not in the child's best interests. Item 12 was rated as an Area Needing Improvement in one case when reviewers determined that the agency had not made concerted efforts to place the four siblings together.

### Rating Determination

Item 12 was assigned an overall rating of Strength. In 96 percent of the applicable cases, reviewers determined that the agency placed siblings together in foster care whenever appropriate. This percentage is greater than the 90 percent required for a rating of Strength. Item 12 was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, in 2005 the Maryland General Assembly passed a bill requiring that siblings in out-of-home care be placed together. When siblings are not placed together, the caseworker must document in the case record the reasons why and the efforts that had been and are currently being made to place the children together. When caseworkers determined that sibling placement is not appropriate, the reasons for this decision also must be documented in the case file. The Statewide Assessment reports

that the primary barriers to the placement of siblings together are the lack of sufficient resource homes to care for sibling groups and the uneven distribution of such resources across the State. As reported in the Statewide Assessment, during the MD-CFSR, 48 (91 percent) of the 53 cases reviewed for this item were rated as a Strength.

### Stakeholder Interview Information

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State generally makes concerted efforts to keep siblings together in foster care.

### Item 13. Visiting with parents and siblings in foster care

Strength       Area Needing Improvement

#### Case Review Findings

Item 13 was applicable for 35 (87.5 percent) of the 40 foster care cases. Cases were not applicable for an assessment of this item if the child had no siblings in foster care and if one of the following conditions was met with regard to the parents: TPR was established prior to the period under review and parents were no longer involved in the child’s life or were deceased; or visitation with a parent was not considered in the best interests of the child. In assessing this item, reviewers were to determine whether the agency had made, or was making, diligent efforts to facilitate sufficient visitation between children in foster care and their parents and between children in foster care and their siblings also in foster care, and whether the visits occurred with sufficient frequency to meet the needs of children and families. The results of the assessment of item 13 are presented in the table below.

Item 13 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	3	4	6	13	37
Area Needing Improvement	15	5	2	22	63
<b>Total Applicable Foster Care Cases</b>	<b>18</b>	<b>9</b>	<b>8</b>	<b>35</b>	
Not Applicable Foster Care Cases	2	1	2	5	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>17%</b>	<b>44%</b>	<b>75%</b>		

Item 13 was rated as a Strength in 13 cases when reviewers determined that the frequency and quality of visitation with parents and siblings met the needs of the children. Item 13 was rated as an Area Needing Improvement in 22 cases when reviewers determined one or more of the following:

- The agency did not make concerted efforts to promote visitation with the mother (12 cases).
- The agency did not make concerted efforts to promote visitation with the father (12 cases).
- The agency did not make concerted efforts to promote visitation with siblings in foster care (seven cases).

Reviewers noted that in many of the cases rated as Area Needing Improvement, parents were not provided with a visitation plan that established clear guidelines for visitation with children in foster care.

Additional information about visitation frequency is provided in the table below.

<b>Typical Frequency of Child's Visits During the Period Under Review</b>	<b>With Mother</b>	<b>With Father</b>	<b>With Siblings in Foster Care</b>
Visits occurred at least once a week	6 (22%)	4 (19%)	1 (7%)
Visits occurred less frequently than once a week but at least twice a month	6 (22%)	0	3 (20%)
Visits occurred less frequently than twice a month but at least once a month	5 (19%)	3 (14%)	5 (33%)
Visits occurred less frequently than once a month	8 (30%)	10 (48%)	5 (33%)
There were no visits during the period under review	2 (7%)	4 (19%)	1 (7%)
<b>Total Applicable Cases</b>	<b>27</b>	<b>21</b>	<b>15</b>

### **Rating Determination**

Item 13 was assigned an overall rating of Area Needing Improvement. In 37 percent of the applicable cases, reviewers determined that the agency made concerted efforts to ensure that visitation was of sufficient frequency to meet the needs of the family. This percentage is less than the 90 percent required for a rating of Strength. Item 13 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, when the permanency plan for a child is reunification, the visitation plan must offer weekly visits to the parents or legal guardian. As the case progresses toward reunification, visitation generally increases and will proceed to overnight visits leading up to the reunification. When siblings are placed in different foster homes, the foster parents and caseworker are expected to collaborate to ensure that siblings remain in contact. However, the Statewide Assessment notes that sibling visitation is not consistent for all children in out-of-home care and that visitation rules and logistical issues often hinder meaningful visits between parents and their children, particularly when parents are in correctional institutions. As noted in the Statewide Assessment 77 percent of the 77 cases reviewed for this item during the MD-CFSR were rated as a Strength.

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the State is effective in promoting visitation between children in foster care and their parents and siblings in foster care. With regard to sibling visitation, some Baltimore County stakeholders reported that in addition to traditional visitation, the Baltimore County LDSS holds a week-long annual summer sibling camp for children in foster care.

## Item 14. Preserving connections

Strength       Area Needing Improvement

### Case Review Findings

Item 14 was applicable for 38 (95 percent) of the 40 foster care cases. Item 14 was not applicable in two foster care cases. In one case, the child was abandoned at birth, and in the other case, the child was in foster care for only 1 day. In assessing item 14, reviewers were to determine whether the agency had made, or was making, diligent efforts to preserve the child's connections to neighborhood, community, heritage, extended family, faith, and friends while the child was in foster care. This item is not rated on the basis of visits or contacts with parents or siblings in foster care. The results of the assessment of item 14 are presented in the table below.

Item 14 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	12	6	9	27	71
Area Needing Improvement	6	4	1	11	29
<b>Total Applicable Foster Care Cases</b>	<b>18</b>	<b>10</b>	<b>10</b>	<b>38</b>	
Not Applicable Foster Care Cases	2	0	0	2	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>67%</b>	<b>60%</b>	<b>90%</b>		

Item 14 was rated as a Strength in 27 cases when reviewers determined that the agency made concerted efforts to preserve the child's connections with extended family members, religious or cultural heritage, schools, community, and friends. Item 14 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- The agency did not make concerted efforts to maintain the child's connections to extended family (nine cases).
- The agency did not make concerted efforts to maintain the child's connections to community/neighborhood (three cases).
- The agency did not make concerted efforts to maintain any connections for the child (two cases).

### Rating Determination

Item 14 was assigned an overall rating of Area Needing Improvement. In 71 percent of the cases, reviewers determined that the agency had made concerted efforts to maintain the child's connections with extended family, culture, religion, community, and school. This percentage is less than the 90 percent required for a rating of Strength. Item 14 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, during the MD-CFSR, 84 percent of the 82 cases reviewed for preserving connections were rated as a Strength. The Statewide Assessment also notes that efforts to preserve connections often are identified in the child's case plan and are an important aspect of the State's Place Matters initiative.

### Stakeholder Interview Information

The few stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State generally is effective in preserving connections with extended family and school for children in foster care.

### Item 15. Relative placement

     Strength        X   Area Needing Improvement

### Case Review Findings

Item 15 was applicable for 33 (82.5 percent) of the 40 foster care cases. Cases were not applicable if relative placement was not an option during the period under review because the child was in an adoptive placement at the start of the time period, or the child entered foster care needing specialized services that could not be provided in a relative placement. In assessing this item, reviewers were to determine whether the agency made diligent efforts to locate and assess both maternal and paternal relatives as potential placement resources for children in foster care. The results of the assessment of item 15 are presented in the table below.

Item 15 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	12	5	8	25	<b>76</b>
Area Needing Improvement	5	2	1	8	<b>24</b>
<b>Total Applicable Foster Care Cases</b>	<b>17</b>	<b>7</b>	<b>9</b>	<b>33</b>	
Not Applicable Foster Care Case	3	3	1	7	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>71%</b>	<b>71%</b>	<b>89%</b>		

Item 15 was rated as a Strength when reviewers determined the following:

- The child was placed with relatives (12 cases).
- The child was not placed with relatives, but the agency made diligent efforts to search for both maternal and paternal relatives when applicable (13 cases).

Item 15 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The agency had not made efforts to search for maternal relatives (five cases).
- The agency had not made efforts to search for paternal relatives (seven cases).

### Rating Determination

Item 15 was assigned an overall rating of Area Needing Improvement. In 76 percent of cases, reviewers determined that the agency had made diligent efforts to locate and assess relatives as potential placement resources. This percentage is less than the 90 percent required for a rating of Strength. Item 15 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

As reported in the Statewide Assessment, relative placement is the preferred placement option when out-of-home placement is required. State policy requires that adult relatives and/or adults with whom the child has a significant relationship be identified and assessed for their capacity to meet the placement needs of a child entering out-of-home care. Efforts to locate both maternal and paternal relatives also are expected to be ongoing throughout the life of the case. It was noted that one purpose of the FIM is to have a forum for identifying and evaluating potential relative caregivers. The Statewide Assessment notes that caseworkers must document all efforts to locate relatives and that attempts to locate relatives are assessed by the court. As indicated in the Statewide Assessment, the LDSS offer case management and placement support services to relatives caring for children in out-of-home care in order to ensure placement stability and to assist the child in achieving permanency. The Statewide Assessment also indicates that there is a Kinship Care Resource Center that provides support and information to kinship providers.

The Statewide Assessment reports that 80 percent of the 71 cases reviewed for this item during the MD-CFSR were rated as Strengths. Additional data provided in the Statewide Assessment indicate that, at the end of January 2009, 1,707 children were placed in formal kinship care and 1,058 were placed in restricted relative foster care.

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State generally is effective in searching for relatives when children enter foster care and placing children with relatives whenever possible. Additionally, a few stakeholders expressed the opinion that caseworkers continue to search for potential relative caregivers on an ongoing basis.

### **Item 16. Relationship of child in care with parents**

Strength       Area Needing Improvement

### **Case Review Findings**

Item 16 was applicable for 30 (75 percent) of the 40 foster care cases. Cases were not applicable if parental rights had been terminated before the period under review and parents were no longer involved with the child; a relationship with the parents was not considered in the child's best interests throughout the period under review; or both parents were deceased. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to support or maintain the bond between children in foster care and their mothers and fathers through efforts other than arranging visitation. The results of the assessment of item 16 are presented in the table below.

<b>Item 16 Ratings</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Strength	2	4	7	13	<b>43</b>
Area Needing Improvement	12	4	1	17	<b>57</b>
<b>Total Applicable Foster Care Cases</b>	<b>14</b>	<b>8</b>	<b>8</b>	<b>30</b>	
Not Applicable Foster Care Cases	6	2	2	10	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
<b>Strength by Site</b>	<b>14%</b>	<b>50%</b>	<b>87.5%</b>		

Item 16 was rated as a Strength in 13 cases when reviewers determined that the agency had made concerted efforts to support and/or strengthen the bond between parents and children through various activities. Item 16 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The agency did not make concerted efforts to support the relationship with the mother (13 cases).
- The agency did not make concerted efforts to support the relationship with the father (13 cases).

Specific findings pertaining to concerted efforts for parents made for this item are shown in the table below.

<b>Efforts Made</b>	<b>With Mother (Number of Cases)</b>	<b>With Father (Number of Cases)</b>
Encouraging the parent's participation in school or after-school activities and attendance at medical appointments and special events	10	7
Providing transportation so that parents can participate in these events, activities, or appointments	4	3
Providing opportunities for family therapeutic situations	8	5
Encouraging foster parents to mentor biological parents and serve as parenting role models for them	1	2
Encouraging and facilitating contact with incarcerated parents (when appropriate) or with parents living far away from the child	0	3
<b>Total Applicable Cases</b>	<b>14</b>	<b>9</b>

### **Rating Determination**

Item 16 was assigned an overall rating of Area Needing Improvement. In 43 percent of the cases, reviewers determined that the agency had made concerted efforts to support the parent-child relationships of children in foster care. This percentage is less than the 90 percent required for a rating of Strength. Item 16 also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, identifying and promoting parental involvement in the child's daily activities is a part of case planning. Caseworkers are expected to assess the quality of the parent-child relationship and to identify the services necessary to

maintain the relationship. However, as reported in the Statewide Assessment, caseworkers reported during the CFSR strategic planning process that there is a lack of concerted efforts to support the parent-child relationship.

The Statewide Assessment reports that 78 percent of the 69 cases reviewed for this item during the MD-CFSR were rated as a Strength.

**Stakeholder Interview Information**

Stakeholders did not comment on this item during the Onsite Review.

**III. CHILD AND FAMILY WELL-BEING**

**Well-Being Outcome 1**

<b>Outcome WB1: Families have enhanced capacity to provide for their children’s needs</b>					
<b>Number of Cases Reviewed by the Team According to Degree of Outcome Achievement</b>					
<b>Degree of Outcome Achievement</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Substantially Achieved	4	6	9	19	<b>29.7</b>
Partially Achieved	11	6	4	21	<b>32.8</b>
Not Achieved	15	5	4	24	<b>37.5</b>
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Substantially Achieved by Site</b>	<b>13%</b>	<b>35%</b>	<b>53%</b>		

**Status of Well-Being Outcome 1**

Maryland is not in substantial conformity with Well-Being Outcome 1. The outcome was determined to be substantially achieved in 29.7 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 29 percent of the 24 in-home services cases. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

**Key Concerns From the 2003 CFSR**

The following concerns were identified in the 2003 review:

- The State was not consistently effective in assessing needs and providing services to children, parents, and foster parents.
- Parents and children were not consistently included in the case planning process.

- The frequency and quality of caseworker contacts with parents were not of sufficient quality or quantity to ensure the children’s safety or well-being.

To address the identified concerns, the State implemented the following strategies:

- Implemented the Structured Analysis Family Evaluation home study methodology, which assesses the strengths and needs of foster parents at the time of the home study process
- Implemented the Child and Adolescent Needs and Strengths (CANS) comprehensive assessment for all children in group care to help develop a plan of care based on the child’s profile of strengths and needs
- Implemented the FCPM and FIMs to increase participation of children and their family members in the permanency and service planning process
- Provided family-centered practice and culturally competent practices training to assist caseworkers in engaging the child and family in case planning
- Issued policy guidelines for visiting children in out-of-home placement to monitor the child’s safety, permanency, and well-being
- Revised policy to require caseworkers to visit with parents in both in-home and out-of-home cases (establishing the frequency of visitation for out-of-home care at a minimum of once a month and in-home visitation frequency based on the assessed level of need)

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

**Key Findings of the 2009 CFSR**

The findings pertaining to the items assessed under Well-Being Outcome 1 are presented and discussed below.

**Item 17. Needs and services of child, parents, and foster parents**

     Strength              X   Area Needing Improvement

**Case Review Findings**

Item 17 was applicable for all 64 cases. In assessing this item, reviewers were to determine whether the agency had adequately assessed the needs of children, parents, and foster parents and provided the services necessary to meet those needs. This item excludes the assessment of children’s (but not parents’) needs pertaining to education, physical health, and mental health. These areas are addressed in later items. The results of the assessment of item 17 are presented in the table below.

<b>Item 17 Ratings</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Strength	5	7	10	22	<b>34</b>
Area Needing Improvement	25	10	7	42	<b>66</b>
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>17%</b>	<b>41%</b>	<b>59%</b>		

Item 17 was rated as a Strength in 32.5 percent of the 40 foster care cases and 37.5 percent of the 24 in-home services cases. Item 17 was rated as a Strength in 22 cases when reviewers determined that the needs of children, parents, and foster parents had been adequately assessed and that identified service needs had been met. Item 17 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- There was an inadequate assessment of children’s needs (13 cases).
- There was an inadequate assessment of mothers’ needs (24 cases).
- There was an inadequate assessment of fathers’ needs (31 cases).
- There was an inadequate assessment of foster parents’ needs (five cases).
- The agency did not provide appropriate services to address children’s needs (16 cases).
- The agency did not provide appropriate services to address mothers’ needs (28 cases).
- The agency did not provide appropriate services to address fathers’ needs (33 cases).
- The agency did not provide appropriate services to address foster parents’ needs (five cases).

Additional case review findings pertaining to needs assessments and service provisions are shown in the table below.

<b>Target Person for Needs Assessment and Services</b>	<b>Foster Care Cases</b>		<b>In-Home Services Cases</b>	
	<b>Yes</b>	<b>Applicable</b>	<b>Yes</b>	<b>Applicable</b>
Mother’s needs assessed and met	11 (39%)	28	12 (50%)	24
Father’s needs assessed and met	4 (17%)	23	8(36%)	22
Foster parents’ needs assessed and met	27 (84%)	32	NA	NA
Child’s needs assessed and met	30 (75%)	40	16 (67%)	24

### **Rating Determination**

Item 17 was assigned an overall rating of Area Needing Improvement. In 34 percent of the cases, reviewers determined that the agency had adequately assessed and addressed the service needs of children, parents, and foster parents. This percentage is less than the 90 percent required for a rating of Strength. Item 17 also was rated as an Area Needing Improvement in Maryland’s 2003 CFSR.

### **Statewide Assessment Information**

As reported in the Statewide Assessment, State policy is designed to promote quality assessments for children and families that enable the caseworkers to provide the appropriate services. According to the Statewide Assessment, the Maryland Safety Assessment for Every Child (SAFE-C) and the MRFA are used during the investigation and in the in-home cases to assess safety and risk concerns and identify service needs. The Statewide Assessment also reports that the SAFE-C tool is to be used to assess children in their out-of-home placements. In addition, it was noted that the CANS Comprehensive Assessment is required for all children and youth placed in residential care facilities. CANS is used with the Treatment Fidelity Index to determine if the strengths and needs identified are incorporated into the plan of care.

The Statewide Assessment reports that DHR/SSA is responsible for ensuring that birth families participate in an individualized assessment to develop the permanency plan and identify service needs. The assessment identifies resources that can increase service participation and support the achievement of case plan goals.

The Statewide Assessment also reports that the Families Now Program provides an array of services designed to fit the needs of the family and children who are at risk of foster care. Additionally, the State uses Promoting Safe and Stable Families grants to operate family preservation services, family support services, time-limited family reunification services, and adoption promotion and support services.

According to the Statewide Assessment, policy requirements for meeting the needs of foster parents include the following:

- Provide the appropriate supportive services to enable the foster parents to meet the unique needs of each child in their care
- Respond as soon as possible to crisis situations that may arise from the child's placement in a foster home
- Assist foster parents in preparation for the separation of the child from the foster care placement
- Maintain regular contact with the foster parents and the child in foster care

The Statewide Assessment provided the following information regarding this item:

- During the 2008 MD-CFSR, 76 percent of the 162 cases reviewed for this item were rated as a Strength.
- In 95 percent of cases reviewed by the LSR, it was determined that services were made available to the child, mother, and caregiver. However, it also was determined that fathers received fewer services than did children, mothers, and caregivers.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions regarding the State's effectiveness in both assessing and addressing the needs of children and families. A few stakeholders expressed the opinion that family needs are assessed appropriately and that services are provided according to family needs. Some stakeholders noted that FIMs are used to identify and coordinate appropriate services for families. However, other stakeholders expressed the opinion that the services offered to families do not meet their needs and that there are insufficient services available for youth, particularly older youth. In addition, while some

stakeholders indicated that caseworkers generally address the needs of foster parents, others expressed the opinion that caseworkers are not responsive to the needs of foster parents.

**Item 18. Child and family involvement in case planning**

     Strength        **X**   Area Needing Improvement

**Case Review Findings**

Item 18 was applicable for 61 (95 percent) of the 64 cases. A case was not applicable if parental rights had been terminated prior to the period under review, parents were not involved with the child in any way, and/or the child was too young or had cognitive delays or other conditions that were barriers to participation in case planning. In assessing this item, reviewers were to determine whether parents and children (when appropriate) had been involved in the case planning process, and, if not, whether their involvement was contrary to the child’s best interests. A determination of involvement in case planning required that a parent or child actively participated in identifying the services and goals included in the case plan. The results of the assessment of item 18 are presented in the table below.

Item 18 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	2	7	10	19	<b>31</b>
Area Needing Improvement	25	10	7	42	<b>69</b>
<b>Total Applicable Cases</b>	<b>27</b>	<b>17</b>	<b>17</b>	<b>61</b>	
Not Applicable Cases	3	0	0	3	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>7%</b>	<b>41%</b>	<b>59%</b>		

Item 18 was rated as a Strength in 32 percent of the 37 applicable foster care cases and 29 percent of the 24 in-home services cases. The item was rated as a Strength in 19 cases when reviewers determined that all appropriate parties had actively participated in the case planning process or that the agency had made concerted efforts to involve them in the case planning process. The item was rated as an Area Needing Improvement when reviewers determined that the agency had not made concerted efforts to involve the mother, father, and/or child (when age appropriate) in the case planning process.

Specific information about involving mothers, fathers, and children in case planning is shown in the table below.

Person Involved in Case Planning	Foster Care Cases		In-Home Services Cases	
	Yes	Applicable Cases	Yes	Applicable Cases
Mother involved in case planning?	11 (39%)	28	17 (71%)	24
Father involved in case planning?	5 (22%)	23	8 (36%)	22
Children involved in case planning?	19 (61%)	31	8 (47%)	17

### **Rating Determination**

Item 18 was assigned an overall rating of Area Needing Improvement. In 31 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to involve parents and/or children in the case planning process. This percentage is less than the 90 percent required for a rating of Strength. Item 18 also was rated as an Area Needing Improvement in Maryland’s 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, State policy requires that every effort be made to involve all family members, including noncustodial parents, in the case planning process. The Statewide Assessment notes that within 60 days of a child entering out-of-home care, the caseworker, in collaboration with the child’s parents or legal guardian, must develop a written case plan. For in-home cases, the written case plan must be developed within 45 days and the first review is 45 days after that. The plan is then reviewed every 90 days thereafter. Case plans must include information indicating the extent of the parent, child, and family participation in developing the plan. This case plan must be signed by the caseworker and the parent, with the signature reflecting the participation of the parent in the planning process. A copy of the plan is to be provided to the parents.

As reported in the Statewide Assessment, data from the MD-CFSR indicated that 74 percent of 160 cases reviewed for this item were rated as a Strength.

Additional information on case plans can be found under item 25 in the Systemic Factors section of this report.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions regarding the involvement of parents in case planning. Some stakeholders expressed the opinion that case plan meetings and Family Team Decision Making (FTDM) meetings and FIMs facilitate meaningful engagement of parents in case planning. However, other stakeholders maintained that case plans are developed with minimal or no involvement of parents even when there is a FIM/FTDM.

Most stakeholders expressed the opinion that age-appropriate children generally are involved in case planning. Additionally, a few stakeholders reported that caseworkers discuss the goals of the plan with children who are too young to participate in the more formal planning process.

Additional information on stakeholder perceptions of the case planning process is provided under item 25 in the Systemic Factors section of this report.

### **Item 19. Caseworker visits with child**

     Strength        X   Area Needing Improvement

### Case Review Findings

Item 19 was applicable for all 64 cases. In assessing this item, reviewers were to determine whether the frequency of visits between the caseworkers and children was sufficient to ensure adequate monitoring of the child’s safety and well-being, and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The results of the assessment of item 19 are presented in the table below.

Item 19 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	13	12	11	36	<b>56</b>
Area Needing Improvement	17	5	6	28	<b>44</b>
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>43%</b>	<b>71%</b>	<b>65%</b>		

Item 19 was rated as a Strength in 57.5 percent of the 40 foster care cases and 54 percent of the 24 in-home services cases. The item was rated as a Strength in 36 cases when reviewers determined that the frequency and quality of visits between the caseworkers and children were sufficient to ensure adequate monitoring of the child’s well-being and promote attainment of case goals. Item 19 was rated as an Area Needing Improvement when reviewers determined the following:

- The frequency of caseworker visits was not sufficient to meet the needs of the child, and if visits did occur, they did not focus on issues pertinent to case planning, service delivery, and goal attainment (11 cases).
- The frequency of caseworker visits with children was not sufficient to meet the needs of the child, although when visits did occur, they were substantive (one case).
- The frequency of caseworker visits was sufficient, but the visits did not focus on issues pertinent to case planning, service delivery, and goal attainment (15 cases). In nine of these cases, children were not seen alone by the caseworker.
- There is no indication in the case record that the child was seen by the caseworker during the period under review (one case). The child came into foster care prior to the period under review and documentation did not indicate visitation with the child had occurred from the beginning of the period under review until the court rescinded the protection order in December 2008.

Specific information regarding the frequency of visitation is provided in the table below.

<b>Typical Frequency of Caseworker Visits With Child During the Period Under Review</b>	<b>Foster Care Cases (Number and Percent)</b>	<b>In-Home Services Cases (Number and Percent)</b>
Visits occurred at least once a week	2 (5%)	1 (4%)
Visits occurred less frequently than once a week but at least twice a month	5 (12.5%)	12 (50%)
Visits occurred less frequently than twice a month but at least once a month	28 (70 %)	6 (25%)
Visits occurred less frequently than once a month	4 (10 %)	5 (21%)
There were no visits during the period under review	1 (2.5%)	0
<b>Total Cases</b>	<b>40</b>	<b>24</b>

### **Rating Determination**

Item 19 was assigned an overall rating of Area Needing Improvement. In 56 percent of the cases, reviewers determined that caseworker visits with children were of sufficient frequency and quality. This percentage is less than the 90 percent required for a rating of Strength. Item 19 was rated as a Strength in Maryland’s 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, policy requires that each meeting between the caseworker and a child in out-of-home placement be of sufficient duration and privacy to allow the child the opportunity to express any concerns. The caseworker and the child should discuss information relating to the child’s progress, needs, medical status, and educational needs. Additionally, the caseworker is expected to assess the quality of care and the child’s adjustment to the placement. The Statewide Assessment also reports that State policy requires that a visit must occur between the caseworker and child within the first week of the out-of-home placement and at least once a month thereafter; 9 out of 12 visits must take place where the child lives. With regard to in-home services cases, the Statewide Assessment notes that there are various contact requirements and the requirements for the frequency of contacts is based on the level of service being provided.

As reported in the Statewide Assessment, during the MD-CFSR, 95 percent of the 130 cases reviewed for this item were rated as a Strength.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions regarding whether the frequency and quality of caseworker contacts with children are sufficient to meet the needs of children. While some stakeholders expressed the opinion that caseworkers visit regularly with children and spend time alone with the children, others suggested that caseworker visits with children are not occurring with sufficient frequency and regularity. Similarly, while some stakeholders indicated that, during visits, caseworkers inquire about the children’s safety and well-being and discuss the case plan goals, other stakeholders reported that caseworker visits tend to be perfunctory and do not address issues relevant to the case.

**Item 20. Caseworker visits with parent(s)**

     Strength        **X**   Area Needing Improvement

**Case Review Findings**

Item 20 was applicable for 54 (84 percent) of the 64 cases. Cases were not applicable for this assessment if parental rights had been terminated prior to the period under review and parents were no longer involved in the lives of their children. All cases that were not applicable are foster care cases. Reviewers were to assess whether the caseworker’s face-to-face contact with the children’s mothers and fathers was of sufficient frequency and quality to promote attainment of case goals and ensure the children’s safety and well-being. The results of the assessment of item 20 are presented in the table below.

<b>Item 20 Ratings</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Strength	0	4	9	13	<b>24</b>
Area Needing Improvement	25	11	5	41	<b>76</b>
<b>Total Applicable Cases</b>	<b>25</b>	<b>15</b>	<b>14</b>	<b>54</b>	
Not Applicable Cases	5	2	3	10	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>0%</b>	<b>27%</b>	<b>64%</b>		

Item 20 was rated as a Strength in 20 percent of the 30 applicable foster care cases and 29 percent of the 24 in-home services cases. The item was rated as a Strength in 13 cases when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children and that visits focused on issues pertinent to case planning, service delivery, and goal attainment. Item 20 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Visits with the mother were not of sufficient frequency or quality (14 cases).
- Visits with the father were not of sufficient frequency or quality (15 cases).
- Visits with the mother were of sufficient frequency but did not focus on issues pertaining to case planning or service delivery (eight cases).
- Visits with the father were of sufficient frequency but did not focus on issues pertaining to case planning or service delivery (five cases).
- There were no visits with the mother (seven cases).
- There were no visits with the father (16 cases).

Additional information from the case reviews is provided in the table below.

Typical Frequency of Caseworker Visits With Parents During the Period Under Review	Foster Care Cases		In-Home Services	
	Mother	Father	Mother	Father
Visits occurred at least once a week	2 (7%)	1 (4%)	1 (4%)	0
Visits occurred less frequently than once a week but at least twice a month	1 (4%)	0	10 (42%)	2 (10%)
Visits occurred less frequently than twice a month but at least once a month	9 (32%)	1 (4%)	7 (29%)	6 (29%)
Visits occurred less frequently than once a month	10 (36%)	11 (48%)	5 (21%)	7 (33%)
There were no visits during the period under review	6 (21%)	10 (43%)	1 (4%)	6 (29%)
<b>Total Applicable Cases</b>	<b>28</b>	<b>23</b>	<b>24</b>	<b>21</b>

### Rating Determination

Item 20 was assigned an overall rating of Area Needing Improvement. In 24 percent of the applicable cases, reviewers determined that the frequency and quality of caseworker visits with parents were sufficient to monitor the safety and well-being of the child or promote attainment of case goals. This percentage is less than the 90 percent required for a rating of Strength. Item 20 also was rated as an Area Needing Improvement in Maryland’s 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, policy requires that contacts with the parents must be of sufficient duration and quality to allow for full discussion and evaluation of the family’s strengths and needs. For foster care cases, caseworkers are required to make face-to-face visits with parents of children who are receiving out-of- home services on a monthly basis to provide support and assess progress on case plan goals. For in-home services cases, the Statewide Assessment notes that there are various contact requirements with the requirements for frequency of contact based on the level of service being provided.

As reported in the Statewide Assessment, during the MD-CFSR, 73 percent of the 134 cases reviewed for this item were rated as a Strength.

### Stakeholder Interview Information

The few stakeholders commenting on this item during the Onsite Review expressed the opinion that the frequency of caseworker visits with parents is generally sufficient to meet the needs of the child and family. Quality of visits by caseworkers with parents was not addressed by stakeholders.

## Well-Being Outcome 2

<b>Outcome WB2: Children receive appropriate services to meet their educational needs</b>					
<b>Number of Cases Reviewed by the Team According to Degree of Outcome Achievement</b>					
<b>Degree of Outcome Achievement</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Substantially Achieved	16	8	13	37	<b>77.1</b>
Partially Achieved	1	0	1	2	<b>4.2</b>
Not Achieved	5	4	0	9	<b>18.8</b>
<b>Total Applicable Cases</b>	<b>22</b>	<b>12</b>	<b>14</b>	<b>48</b>	
Not Applicable Cases	8	5	3	16	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Substantially Achieved by Site</b>	<b>73%</b>	<b>67%</b>	<b>93%</b>		

### Status of Well-Being Outcome 2

Maryland is not in substantial conformity with Well-Being Outcome 2. The outcome was substantially achieved in 77.1 percent of the cases. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 81 percent of the 36 applicable foster care cases and 67 percent of the 12 applicable in-home services cases. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

### Key Concerns From the 2003 CFSR

The key concern identified in the 2003 CFSR was that the State was not consistent in its efforts to assess children's educational needs and provide appropriate services to meet those needs.

To address the identified concern, the State did the following:

- Collaborated with the Maryland State Department of Education (MSDE) and local school districts to develop the handbook *Access to Education for Children in State-Supervised Care*, which helps to address common barriers to success in school for foster children
- Held a summit on educational access issues and solutions that included LDSS, local education, MSDE, advocates, and foster parents

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

## Item 21. Educational needs of the child

Strength       Area Needing Improvement

### Case Review Findings

Item 21 was applicable for 48 (75 percent) of the 64 cases reviewed. Cases were not applicable if either of the following applied: Children were not of school age, or children in the in-home services cases did not have service needs pertaining to education-related issues. In assessing this item, reviewers were to determine whether children’s educational needs were appropriately assessed and whether services were provided to meet those needs. The results of the assessment of item 21 are presented in the table below.

Item 21 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	16	8	13	37	77
Area Needing Improvement	6	4	1	11	23
<b>Total Applicable Cases</b>	<b>22</b>	<b>12</b>	<b>14</b>	<b>48</b>	
Not Applicable	8	5	3	16	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>73%</b>	<b>67%</b>	<b>93%</b>		

Item 21 was rated as a Strength in 37 cases when reviewers determined that the child’s educational needs were appropriately assessed and services were provided, if necessary. Item 21 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The child’s educational needs were neither assessed nor addressed (nine cases).
- The child had identified educational needs that were not addressed (two cases).

### Rating Determination

Item 21 was assigned an overall rating of Area Needing Improvement. In 77 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to meet the educational needs of children. This percentage is less than the 95 percent required for this item to be rated as a Strength. A 95-percent standard is established for this item because it is the only item assessed for this outcome. Item 21 also was rated as an Area Needing Improvement in Maryland’s 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, the State assesses the educational needs of the child through the individualized education plan. The child’s caseworker is expected to be involved with the school system on an ongoing basis and the department provides training for foster parents regarding their rights and responsibilities related to the education system. The Statewide Assessment also notes that in Baltimore City, school liaisons working for the LDSS address educational issues that arise for children in foster care.

As indicated in the Statewide Assessment, the State has contracted with 17 organizations to provide educational services for children in foster care who are not able to participate in traditional school settings. It was noted that stakeholders participating in the Child and Family Services Interagency Strategic Planning process expressed concern about the lack of sufficient supports for foster parents with regard to educational issues.

The following data were provided in the Statewide Assessment:

- The MD-CFSR findings for 2008 indicate that 93 percent of the 107 cases reviewed for this item were rated as a Strength.
- Supervisory case reviews found that 96 percent of children in school had their educational needs assessed, and 94 percent of children had their needs addressed.

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that DHR/SSA generally is effective in meeting children's education needs. Baltimore County and Baltimore City stakeholders said that the LDSS in those jurisdictions have Pupil Personnel workers to help navigate the education system for children in out-of-home care. Various stakeholders expressed the following strengths with regard to the agency's effectiveness in meeting children's educational needs:

- Caseworkers generally are present at Individualized Education Plan meetings.
- School personnel are present at the FIM.
- The agency makes concerted efforts to maintain children in the same school.
- Foster parents make efforts to ensure that educational needs are met.

Additionally, several stakeholders expressed the opinion that the Department of Human Resources (DHR) and the Department of Education at the local and State levels generally work well together.

Stakeholders noted that children in foster care and children who were adopted from the foster care system when they were age 14 or older (as well as their biological siblings in the same adoptive home) are eligible for a tuition waiver at any public college in the State. Stakeholders also noted that the Education and Training Voucher program provides a stipend to older youth who wish to participate in a vocational program.

### Well-Being Outcome 3

<b>Outcome WB3: Children receive adequate services to meet their physical and mental health needs</b>					
<b>Number of Cases Reviewed by the Team According to Degree of Outcome Achievement</b>					
<b>Degree of Outcome Achievement</b>	<b>Baltimore City</b>	<b>Baltimore County</b>	<b>Charles County</b>	<b>Total</b>	<b>Percent</b>
Substantially Achieved	16	12	16	44	<b>71.0</b>
Partially Achieved	7	3	0	10	<b>16.1</b>
Not Achieved	5	2	1	8	<b>12.9</b>
<b>Total Applicable Cases</b>	<b>28</b>	<b>17</b>	<b>17</b>	<b>62</b>	
Not Applicable Cases	2	0	0	2	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Substantially Achieved by Site</b>	<b>57%</b>	<b>71%</b>	<b>94%</b>		

### Status of Well-Being Outcome 3

Maryland is not in substantial conformity with Well-Being Outcome 3. The outcome was substantially achieved in 71.0 percent of the applicable cases. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 75 percent of the 40 foster care cases and 64 percent of the 22 applicable in-home services cases. The State was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

### Key Concerns From the 2003 CFSR

The key concern identified in the 2003 CFSR was that children were being assessed for mental health needs, but were not receiving the recommended services to address the identified needs.

To address the identified concern, the State implemented the following strategies:

- Participated in the Transitioning Age Youth Policy Academy sponsored by the Substance Abuse and Mental Health Services Administration to define and develop a system of care for youth transitioning out of foster care
- Convened a Department of Health and Mental Hygiene (DHMH) and DHR Panel on improving access to care for children in out-of-home placements, as well as the Maryland Task Force on Child Welfare Accountability, which issued a report in 2004
- Developed a Health Care Advisory workgroup to improve physical and mental health care for children in foster care
- Conducted a service array assessment to evaluate the accessibility and availability of recommended services for children

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

## Key Findings of the 2009 CFSR

Findings pertaining to the items assessed under Well-Being Outcome 3 are presented and discussed below.

### Item 22. Physical health of the child

  X   Strength           Area Needing Improvement

#### Case Review Findings

Item 22 was applicable for 53 (83 percent) of the 64 cases reviewed. Cases that were not applicable were in-home services cases in which physical health concerns were not an issue. In assessing this item, reviewers were to determine whether children’s physical health needs (including dental needs) had been appropriately assessed, and the services designed to meet those needs had been, or were being, provided. The findings of the assessment of item 22 are presented in the table below.

Item 22 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	20	13	15	48	91
Area Needing Improvement	4	1	0	5	9
<b>Total Applicable Cases</b>	<b>24</b>	<b>14</b>	<b>15</b>	<b>53</b>	
Not Applicable Cases	6	3	2	11	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>83%</b>	<b>93%</b>	<b>100%</b>		

Item 22 was rated as a Strength in 92.5 percent of the 40 foster care cases and 85 percent of the 13 applicable in-home services cases. The item was rated as a Strength in 48 cases when reviewers determined that children’s medical and dental needs were routinely assessed and necessary services were provided. Item 22 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- The child’s physical health needs were not adequately assessed or addressed (two cases).
- The child’s dental health needs were not adequately assessed or addressed (four cases).
- The child’s physical health needs were not adequately addressed (one case).

#### Rating Determination

Item 22 was assigned an overall rating of Strength. In 91 percent of the applicable cases, reviewers determined that the agency was effective in assessing and meeting children’s physical health needs. This percentage is greater than the 90 percent required for a rating of Strength. Item 22 also was rated as a Strength in Maryland’s 2003 CFSR.

## **Statewide Assessment Information**

According to the Statewide Assessment, State regulations require that a child in an out-of-home placement be given an initial health screening before placement or within 24 hours of placement, but no later than 5 working days following placement. However, a child who may have been abused receives immediate medical attention. Additionally, a comprehensive health assessment is to be given within 30 days of the child entering foster care. A dental appointment also is scheduled for all children 6 months of age and older. If health needs are identified during the assessment or at any time while a child is in out-of-home placement, DHR/SSA is required to ensure that referrals are made and followed up and that treatment is secured to meet the child's needs. The Department also is required to ensure that all children in out-of-home placement have periodic medical, dental, and developmental examinations. When the initial health screen is completed, a Health Passport is given to the child's out-of-home care provider. After each medical or mental health visit the physician completes the required forms that are to be added to the Health Passport.

As noted in the Statewide Assessment, the In-Home Family Services program can provide, coordinate, or refer families to health-care services or information, including those provided by the Early and Periodic Screening, Diagnosis and Treatment program. The MFRA can be used to determine whether a referral for medical health-care services should be made.

The following data were provided in the Statewide Assessment:

- The MD-CFSR determined that 88 percent of the 128 cases reviewed for this item were rated as a Strength.
- The supervisory case reviews determined that 91 percent of children in foster care received a comprehensive health evaluation within 60 days of their placement and children's physical health needs were appropriately assessed in 93 percent of the cases reviewed.

## **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions on the State's effectiveness in assessing and addressing the medical and dental needs of children. Some stakeholders expressed the opinion that the State generally is effective in this area. A few stakeholders in Baltimore City noted that the Health Unit within that local office ensures that health needs are addressed promptly and thoroughly. However, other stakeholders expressed the opinion that the State is not consistently effective in assessing the medical and dental needs and that services, primarily dental services, are not easily accessible. Also, some stakeholders expressed the opinion that many medical and dental providers do not accept Medicaid and indicated that without Medicaid or private insurance coverage, medical and dental services can be difficult to obtain.

### **Item 23. Mental/behavioral health of the child**

     Strength        X   Area Needing Improvement

### Case Review Findings

Item 23 was applicable for 45 (70 percent) of the 64 cases reviewed. Cases were not applicable if the child was too young for an assessment of mental health needs or if there were no mental health concerns. In assessing this item, reviewers were to determine whether mental health needs had been appropriately assessed and appropriate services to address those needs had been offered or provided. The results of the assessment of item 23 are presented in the table below.

Item 23 Ratings	Baltimore City	Baltimore County	Charles County	Total	Percent
Strength	11	9	11	31	69
Area Needing Improvement	9	4	1	14	31
<b>Total Applicable Cases</b>	<b>20</b>	<b>13</b>	<b>12</b>	<b>45</b>	
Not Applicable Cases	10	4	5	19	
<b>Total Cases</b>	<b>30</b>	<b>17</b>	<b>17</b>	<b>64</b>	
<b>Strength by Site</b>	<b>55%</b>	<b>69%</b>	<b>92%</b>		

Item 23 was rated as a Strength in 77 percent of the 31 applicable foster care cases and 50 percent of the 14 applicable in-home services cases. The item was rated as a Strength in 31 cases when reviewers determined that children’s mental health needs were appropriately assessed and the identified mental health needs were addressed. Item 23 was rated as an Area Needing Improvement when reviewers determined the following:

- Mental health needs were neither assessed nor addressed (eight cases).
- Mental health needs were assessed but services were not provided to address identified needs (six cases).

### Rating Determination

Item 23 was assigned an overall rating of Area Needing Improvement. In 69 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to address the mental health needs of children. This percentage is less than the 90 percent required for a rating of Strength. Item 23 also was rated as an Area Needing Improvement in Maryland’s 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, State policy requires that ongoing mental health services must be provided to children in foster care in accordance with the diagnosis and recommendation of the mental health professional. It was noted that the comprehensive assessment conducted within 30 days of the child entering out-of-home care includes a mental health assessment to determine if further evaluation or treatment is needed. The Statewide Assessment reports that caseworkers are to refer children needing immediate mental health services to qualified mental health practitioners within 10 days of placement.

For children in the in-home services cases, the Statewide Assessment notes that the In-Home Family Services program uses the MFRA to determine whether a referral for mental or behavioral health-care services is necessary. As indicated in the Statewide Assessment, the In-Home Family Services program can provide, coordinate, or refer families to family, couples, and individual counseling or therapy for assistance in resolving family or parent-child relationship problems.

The Statewide Assessment provides the following data with regard to meeting children's mental health needs:

- The 2008 MD-CFSR determined that 86 percent of the 101 cases reviewed for this item were rated as a Strength.
- The supervisory case reviews determined that 83 percent of children in foster care received a mental health screening within 30 days of their placement and children's mental health needs were adequately addressed in 95 percent of the cases reviewed.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions on the State's effectiveness in assessing and addressing the mental health needs of children. A few stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State generally is effective in assessing and addressing the mental health needs of children. Other stakeholders, however, raised the concern that children are not being thoroughly assessed for mental health needs nor are the appropriate services available to meet the needs of children. A few stakeholders expressed the opinion that caseworkers need more training on assessing mental health and referring to the appropriate resources. Stakeholders also noted that families that do not have private insurance or Medicaid often cannot access mental health services. Additionally, sometimes the service options for families with private insurance are limited due to their insurance policy restrictions.

## SECTION B: SYSTEMIC FACTORS

This section of the CFSR Final Report provides information regarding the State’s substantial conformity with the seven systemic factors examined during the CFSR. Information on the items included under each systemic factor comes from the Statewide Assessment and from interviews with stakeholders held during the onsite CFSR. Additional information may come from other Federal reports or assessments.

Each item included in a systemic factor reflects a key Federal program requirement relevant to the Child and Family Services Plan (CFSP) for that systemic factor. The overall rating for each systemic factor is based on the ratings for the individual items incorporated in the systemic factor. For any given systemic factor, a State is rated as being either “in substantial conformity” with that factor (a score of 3 or 4) or “not in substantial conformity” with that factor (a score of 1 or 2). Specific requirements for each rating are shown in the table below.

**Rating the Systemic Factor**

<b>Not in Substantial Conformity</b>		<b>In Substantial Conformity</b>	
1	2	3	4
None of the CFSP or program requirements is in place.	Some or all of the CFSP or program requirements are in place, but more than one of the requirements fail to function as described in each requirement.	All of the CFSP or program requirements are in place, and no more than one of the requirements fails to function as described in each requirement.	All of the CFSP or program requirements are in place and functioning as described in each requirement.

It should be noted that ratings for the items included in each systemic factor are not based on single comments from an individual stakeholder; however, these comments are included in the report when they provide important insights or clarification on the State’s performance on a particular systemic factor.

If a State is not in substantial conformity with a particular systemic factor, then that factor must be addressed in the State’s Program Improvement Plan. For each systemic factor, information is provided about the State’s performance in its first CFSR as well as in the current CFSR. If the systemic factor was part of the State’s Program Improvement Plan, the key concerns addressed in the Program Improvement Plan and the strategies for assessing those concerns are noted.

## I. STATEWIDE INFORMATION SYSTEM

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

### Status of Statewide Information System

Maryland is not in substantial conformity with the systemic factor of Statewide Information System. The State was not in substantial conformity with this factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan.

### Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 review:

- Information on all children in foster care is not readily accessible on a consistent basis.
- The placement location of all children in foster care placed by private agencies under contract with the State was not recorded in the State's data system.

To address these concerns, the State implemented the following strategies:

- Completed statewide implementation of MD CHESSIE
- Completed training of child welfare staff on MD CHESSIE

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

### Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Statewide Information System are presented and discussed below.

**Item 24. The State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or, within the immediately preceding 12 months, has been) in foster care**

     Strength        X   Area Needing Improvement

Item 24 is rated as an Area Needing Improvement. According to stakeholders, MD CHESSIE cannot readily identify the placement location of all children in foster care at any given point in time. This is due to child placement agencies not always informing caseworkers of children's moves in a timely manner. This finding is supported by the results from the Adoption and Foster Care Analysis and Reporting System (AFCARS) review conducted in July 2008, which indicate that placement information for children was not consistent in 43 percent of the cases reviewed due in part to changes in placement locations not being reported to the State by child placement agencies. The AFCARS review also found that permanency goals were not accurate in 45 percent of the cases reviewed. Additionally, although the DHR/SSA is striving to resolve data issues within MD CHESSIE, at the time of the Onsite Review the LDSS were required to submit "hand counts" to the DHR/SSA to validate the accuracy of data. This item also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, MD CHESSIE was implemented in phases across Maryland beginning in February 2006 and ending in January 2007. The Statewide Assessment reports that client and case information from the legacy data system were converted into MD CHESSIE and that MD CHESSIE can identify the demographic characteristics, legal status, location, and goals for every child in the Maryland child welfare system. The system uses ticklers to remind caseworkers about important tasks, assists caseworkers in developing detailed case plans, and produces necessary documents and reports. The Statewide Assessment also reports that for children placed with private providers, information must be entered into MD CHESSIE by the State child welfare caseworker because private providers do not have access to MD CHESSIE.

As noted in the Statewide Assessment, MD CHESSIE records all of the required AFCARS data elements. In addition, standard caseload and outcome reports are produced monthly for local supervisors and program staff. The Statewide Assessment indicates that these reports provide information to support management decisions and detailed information on all children/families with DHR/SSA involvement. MD CHESSIE staff also have the ability to produce ad hoc reports as requested by DHR/SSA.

### **Stakeholder Interview Information**

Many stakeholders commenting on this item during the onsite CFSR expressed the opinion that MD CHESSIE can identify the legal status, demographics, and goals of children in foster care. However, according to some stakeholders, the State currently cannot always readily identify the placement location of a child if the child is placed in a private agency foster home because the State is not informed by the private agency of a child's move in a timely manner. These stakeholders reported that within MD CHESSIE, the location of these children is identified as the child placement agency (CPA) but does not always identify the specific resource home. One key, State-level stakeholder reported that, as a result of this, there are children placed through CPAs whose actual placement location is not identified in MD CHESSIE. A few stakeholders commenting on this item expressed a different opinion by indicating that data within MD CHESSIE generally are accurate and entered in a timely manner, including information about a child's placement or the CPA with whom the child is placed.

Some stakeholders reported that, although the DHR/SSA makes concerted efforts to ensure data accuracy and currently requires that all LDSS submit “hand counts” on all relevant data in order to validate data accuracy, the information in CHESSIE is not always current due to caseworkers not entering information in a timely manner.

In addition, stakeholders expressed different opinions regarding the ease of navigation within MD CHESSIE and the helpfulness of reports generated by the system.

Baltimore County stakeholders reported that in that county, LDSS continue to use data systems that are unique to Baltimore County. These stakeholders reported that staff use the local data systems because they believe that the data are accurate and the documents are more user-friendly than those generated by MD CHESSIE.

## II. CASE REVIEW SYSTEM

Rating of Review Team Regarding Substantial Conformity				
	Not in Substantial Conformity		In Substantial Conformity	
Rating	1	2X	3	4

### Status of Case Review System

Maryland is not in substantial conformity with the systemic factor of Case Review System. The State also was not in substantial conformity with this systemic factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan.

### Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 review:

- Parents were not consistently involved in the case planning process.
- Permanency hearings were not held in a timely manner.
- Notification of foster parents about hearings and reviews was not consistent nor were foster parents provided an opportunity to have input into court hearings.
- There were multiple barriers to achieving timely TPR, including a lack of effort on the part of DHR/SSA to identify absent parents, particularly fathers, early on in the case.

To address these concerns, the State implemented the following strategies:

- Developed a family-centered practice framework that included family engagement, family team meetings, concurrent permanency planning, and family and community involvement in the case planning process
- Implemented the *Best Practices Manual*, developed by the FCCIP, which includes a policy on continuances and postponements to improve timeliness of permanency, and revised the Absent Parent Identification Litany used to assist with early identification of parents
- Issued policy about notification of caregivers and a standardized letter to be sent as notification of hearings to caregivers
- Provided training to available judges, attorneys, and LDSS staff on the requirements to notify caregivers of hearings and to provide them the opportunity to be heard
- Conducted assessments to determine the extent to which court caseloads and resource limitations affect judicial performance

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

### **Key Findings of the 2009 CFSR**

The findings pertaining to the items assessed under Case Review System are presented and discussed below.

#### **Item 25. The State provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions**

     Strength        X   Area Needing Improvement

Item 25 is rated as an Area Needing Improvement. Although the State has implemented the FIM as a process to engage families in the case planning process, the Statewide Assessment reports that findings from the first round of the MD-CFSR (conducted in 23 of 24 jurisdictions between 2006 and 2008) indicate that the State is not consistently involving parents in case plan development. In addition, data from the 2009 onsite Federal CFSR indicate that mothers were involved in case planning in 54 percent of the 52 applicable cases, and fathers were involved in 29 percent of the 45 applicable cases. This item also was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

#### **Statewide Assessment Information**

According to the Statewide Assessment, State policy requires that every effort be made to involve all family members, including noncustodial parents, in the case planning process. As reported in the Statewide Assessment, all LDSS have implemented some type of FIM to utilize for case planning. The Statewide Assessment notes that within 60 days of a child entering out-of-home care, the caseworker, in collaboration with the child's parents or legal guardian, must develop a written case plan.

The case plan must include significant information such as the following:

- The extent of parent, child, and family participation in developing the plan
- A description of the parent-child relationship
- The quality of interactions between parent and child
- Details about the tasks the parent has agreed to perform during the child's placement

This case plan must be signed by the caseworker and the parent, with the signature reflecting the participation of the parent in the planning process. A copy of the plan is to be provided to the parents. All case plans must be reviewed by a supervisor and the case plan is to be reviewed at least every 180 days but can be updated earlier if necessary.

As reported in the Statewide Assessment, findings from the 2007 LSR with regard to the timeliness of case plan development and review indicated the following:

- Ninety-six percent of case plans and service agreements were completed within 60 days of entering out-of-home care.
- Case plans and services agreements were updated within 6 months of entry into out-of-home care for 93 percent of children.
- Case plans and service agreements were updated every 6 months thereafter for 88 percent of children.

The Statewide Assessment also reports that the State is not consistently involving parents in case plan development. Findings from the 2007 LSR indicate that mothers were actively involved in case planning in 87 percent of applicable cases while fathers were involved in only 67 percent of the cases. In addition, the MD-CFSR evaluated 160 cases from LDSS for FY 2008 with regard to parent involvement in case planning and determined that only 74 percent of the cases were rated as a Strength.

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that case plans are routinely prepared in a timely manner for both in-home and out-of-home cases. Most stakeholders also expressed the opinion that case plans are reviewed and updated at regular intervals and in a timely manner.

Stakeholders expressed different opinions regarding the involvement of parents in case planning. Some stakeholders expressed the opinion that FIMs and other case plan meetings facilitate meaningful engagement of parents in case planning. However, other stakeholders maintained that case plans are developed with minimal or no involvement of parents even when there is a FIM.

Stakeholders also expressed different opinions regarding the quality of case plans. Some stakeholders suggested that the FIM and other case plan meetings result in individualized plans that guide the parents and the agency in achieving case goals. In comparison, other stakeholders said that the individualization of the case plan and its quality vary across caseworkers.

In addition, several stakeholders expressed the opinion that the automated case plan in MD CHESSIE is cumbersome to complete and not family- or court-friendly. Several stakeholders indicated that because of the length of the MD CHESSIE case plan, the plans are not provided to the court or reviewed by the court unless the family disagrees with the case plan. One concern noted by stakeholders

was that caseworkers must do a completely new case plan in MD CHESSIE any time a change occurs because the case plan in MD CHESSIE cannot be updated.

**Item 26. The State provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review**

  X   Strength             Area Needing Improvement

Item 26 is rated as a Strength. Although the State did not provide data, the Statewide Assessment and stakeholder interviews indicate that the State has a process for periodic reviews of the status of each child in foster care and that the reviews generally are held in a timely manner. This item also was rated as a Strength in Maryland’s 2003 CFSR.

**Statewide Assessment Information**

According to the Statewide Assessment, the child, parent, foster parent, and relevant professionals participate in a court review at least every 6 months, with some courts conducting review hearings more frequently. Five Judicial Circuits use Permanency Planning Liaisons to assist the courts by conducting periodic reviews of the court files for timeliness and reviewing the court orders for the required findings. Many judicial circuits utilize retired judges and masters to hear CINA matters to assist with managing court dockets, alleviate the need for continuances or postponements, and ensure that cases have regular and timely review hearings.

As reported in the Statewide Assessment, additional reviews are conducted on a sample of cases by Maryland’s Citizens Review Board for Children (CRBC). The CRBC reviews, which are held independent of the courts, assesses the permanency goal, reasonable efforts, safety protocols, risk, placement plan, and the child’s educational and health needs. Findings from CRBC reviews are documented in the case record and presented to the court.

**Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State generally ensures that a periodic review of the status of each child is held at least every 6 months if not more frequently. Stakeholders, however, expressed different opinions on the quality of the periodic reviews and whether the reviews expedite permanency for the child. Most stakeholders indicated that the judicial reviews are helpful and that these reviews are useful in moving children toward permanency. In comparison, other stakeholders expressed the opinion that the judicial review does not assist in moving a child to permanency and that the court should hold the parents more accountable in meeting their case plan goals. Some stakeholders in Baltimore County and Baltimore City suggested that the effectiveness of the hearings depends on the master assigned to the case.

Stakeholders reported that in addition to court reviews, some foster care cases are reviewed by CRBC. A few stakeholders expressed the opinion that the CRBC review is a duplication of the judicial review process. Also, a few stakeholders said that the agency is not required to follow the recommendations of the CRBC.

**Item 27. The State provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter**

**Strength**       **Area Needing Improvement**

Item 27 is rated as a Strength. Although the State did not provide data, the Statewide Assessment and stakeholders interviewed during the onsite CFSR reported that the permanency hearing is held within 12 months of a child entering foster care and generally every 6 months thereafter. This item was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

#### **Statewide Assessment Information**

According to the Statewide Assessment, the court must hold a permanency planning hearing to determine a child's permanency plan no later than 11 months after a child enters an out-of-home placement. Subsequent hearings to review the permanency plan are to be conducted every 6 months until permanency is achieved.

At the conclusion of each permanency planning hearing, courts schedule the next hearing to ensure that cases are scheduled within statutory timelines. The State's Postponement/Continuance Policy discourages postponements and continuances in all but the most compelling circumstances.

#### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that permanency hearings are generally held in a timely manner and that the hearings are effective and focus on permanency. Some stakeholders reported that permanency is reviewed within 11 months of the child entering foster care and then every 6 months thereafter.

**Item 28. The State provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act**

**Strength**       **Area Needing Improvement**

Item 28 is rated as an Area Needing Improvement. As noted in the Statewide Assessment, LSR data indicate that TPR petitions are not being filed in a timely manner and reasons for not filing are not being documented consistently. In addition, during the onsite CFSR case review, reviewers determined that ASFA requirements for filing TPR were met in only 45 percent of the 20 applicable cases. This item was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, Maryland statute concerning TPR is consistent with ASFA. When the primary concurrent plan is changed to adoption by the court, the agency is required to file a petition to TPR within 30 days of the court's review of the permanency plan or within 60 days if the department does not agree with the court's plan of adoption.

The Statewide Assessment also notes that exceptions to filing for TPR are reviewed during clinical supervision, documented in the case file, included in court reports, and reviewed during the permanency hearing.

As reported in the Statewide Assessment, LSR data indicate that TPR petitions are not being filed in a timely manner, even when circumstances suggest that it is necessary. The data show that TPR was filed in 55 percent of a sample of 138 cases involving children who had been in out-of-home care for 15 of the past 22 months or who met other statutory requirements for filing a TPR petition. When TPR was not filed in a timely manner, a compelling reason for not filing was documented in only 84 percent of applicable cases.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review expressed different opinions on the State's effectiveness in filing for TPR in accordance with the provisions of ASFA. Some stakeholders indicated that DHR/SSA files for TPR when children have been in foster care for 15 of the most recent 22 months or earlier if the case circumstances require it. However, other stakeholders reported that DHR/SSA is not filing for TPR in accordance with ASFA requirements. In addition, Baltimore City stakeholders reported that the DHR/SSA will not file for TPR if there is not an identified adoptive resource.

Most stakeholders expressed the opinion that when the agency does not file for TPR, compelling reasons usually are documented in the case plan and presented to the court. Various stakeholders identified the following as frequent reasons for not filing for TPR:

- The child is placed with a relative.
- The child has a relationship with the biological family and does not wish to be adopted.
- The parents are diligently working toward reunification but will not complete the case plan within 15 months.

**Item 29. The State provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child**

  X   Strength             Area Needing Improvement

Item 29 is rated as a Strength. Although the State did not provide data, most stakeholders expressed the opinion that the DHR/SSA and the court generally ensure that caregivers receive written notice of hearings involving children in their care and that caregivers have the opportunity to be heard in hearings involving children in their care. Additional data provided by the State indicate that foster

parents/caregivers were notified of permanency hearings in 94 percent of the applicable cases reviewed by the LSR. This item was rated as an Area Needing Improvement in Maryland’s 2003 CFSR.

**Statewide Assessment Information**

According to the Statewide Assessment, Maryland statute requires that the LDSS give advance notice of permanency planning hearings and subsequent review hearings to the child’s foster parent, pre-adoptive parent, or relative providing care. Caseworkers send a standardized letter to the foster parent or other temporary caregiver that provides the date and location of the court hearing and informs them of their right to be heard. However, as reported in the Statewide Assessment, it is not known to what extent caregivers are afforded the right to be heard. The Statewide Assessment indicates that most courts document in the court order when a caregiver is present for a hearing.

**Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions on whether caregivers are notified of upcoming hearings. Most stakeholders expressed the opinion that DHR/SSA or the court generally ensures that caregivers receive written notice of hearings involving children in their care. A few stakeholders, however, indicated that caregivers are not notified of hearings. Stakeholders in Baltimore City and Charles County indicated that the LDSS are responsible for ensuring that caregivers are notified of hearings. Baltimore County stakeholders indicated that the court is responsible for ensuring caregivers are notified of hearings.

Most stakeholders expressed the opinion that caregivers have the opportunity to be heard in hearings involving children in their care if the court is aware of their presence.

**III. QUALITY ASSURANCE SYSTEM**

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

**Status of Quality Assurance System**

Maryland is not in substantial conformity with the systemic factor of QA System. The State also was not in substantial conformity with this factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan.

## **Key Concerns From the 2003 CFSR**

The key concern identified in the 2003 CFSR was that the State's primary QA system only monitored for compliance and did not provide feedback on the quality of services or outcomes.

To address this concern, the State implemented the following strategies:

- Consulted with the National Resource Center on Organizational Improvement (NRCOI) to revise the QA system
- Implemented the MD-CFSR process modeled after the Federal CFSR, including descriptive analyses in the form of final reports, and used the results to develop Program Implementation Plans at local levels, which are monitored by DHR/SSA
- Trained available QA team on the MD-CFSR process
- Implemented the LSR review instrument and process for monthly review of a sample of cases
- Conducted training for available QA staff and LDSS supervisors on the use of the LSR instruments
- Implemented a local department self-assessment process that incorporates national standards data, demographics, community resources and services, organizational structure, and county-specific information
- Collaborated with CRBC to create a process that is streamlined and reduces duplication of QA assessments

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

## **Key Findings of the 2009 CFSR**

The findings pertaining to the specific items assessed under QA System are presented and discussed below.

### **Item 30. The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children**

  X   Strength           Area Needing Improvement

Item 30 is rated as a Strength. Information from the Statewide Assessment and from stakeholders indicates that the State has standards in place to ensure the quality of services to protect the safety and health of children. This item also was rated as a Strength in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, DHR/SSA resource homes are monitored by the 24 LDSS. State regulations set standards for resource home approval that include fire, health, and sanitation requirements. Annual review of safety and health requirements for resource homes is conducted by the LDSS. CPR and first aid procedures are included in training provided to all DHR/SSA foster/adoptive parents. According to the Statewide Assessment, the DHR Office of Licensing and Monitoring (OLM) is responsible

for oversight of State regulations governing child placement agencies and residential child care facilities. Private agencies and residential care facilities must meet the same standards of safety and health care as public agencies. OLM staff provide monthly monitoring of child placement agencies and residential child care facilities throughout the State.

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State has effective standards in place to address the quality of services provided to children in foster care. Several stakeholders expressed the opinion that standards regarding quality of care and qualifications of staff are applied to contracted services. Several stakeholders also reported that OLM makes two announced and two unannounced site visits to CPAs and residential child care facilities annually.

**Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented**

Strength       Area Needing Improvement

Item 31 is rated as an Area Needing Improvement. Although the State has a QA system, the Statewide Assessment and stakeholders indicated that the current process is not effective nor does it address key issues or provide timely feedback on findings. This item was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, QA in the State consists of the following two primary processes.

- The MD-CFSR process includes a local self-assessment, onsite case record review, case-related interviews, focus groups with external stakeholders, and an exit conference. Each LDSS goes through the full MD-CFSR every 3 years and, at the time of the Statewide Assessment, 23 of the 24 LDSS had completed the MD-CFSR and were in the process of developing and reporting on their Program Improvement Plans.
- The LSR process requires supervisors in local departments to review a sample of cases every month and report findings to the QA unit. The supervisor completes a review instrument with 200+ items and mails the completed form to the State office. In 2007, almost 600 cases across the State were reviewed through the LSR process.

The Statewide Assessment reports that there are currently five QA staff and one manager to coordinate and manage Maryland's State-level QA responsibilities. The QA staff are responsible for a particular region in Maryland. They prepare the LDSS for the MD-CFSR and manage all of the logistical arrangements for the Onsite Review including reviewer recruitment. When the review is finished, they are responsible for drafting the final report, which synthesizes information from the local self assessment, case record review, and stakeholder interviews. After the final report is approved, they are responsible for helping the LDSS develop and monitor their Program Improvement Plans.

The Statewide Assessment indicates that although Maryland has been effective in developing an array of QA processes, barriers exist to fully implementing an efficient and effective QA system. According to the Statewide Assessment, these barriers include the following:

- Sample sizes reviewed during onsite and supervisory reviews were small and are not generalized.
- Self-assessments and Program Improvement Plans developed by the LDSS varied in quality and comprehensiveness.
- Available data sources at State and local levels were not fully integrated into the QA system.
- Handwritten review instruments increased the likelihood for error and delayed analysis of data and interpretation of findings.
- Feedback from QA activities was not provided to the LDSS in a timely manner, nor was it used to improve practice.

The State, according to the Statewide Assessment, will address the barriers during a redesign of the QA process.

According to the Statewide Assessment, additional QA processes/tools in the State include the following:

- The CRBC CPS review process that conducts reviews of cases receiving in-home services
- The Supervisory Tool, which is a compliance instrument designed to ensure that proper case decisions are made
- An annual review of State child welfare data

**Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed different opinions about the effectiveness of the State’s QA system. Many stakeholders reported that although the MD-CFSR and LSR process assess compliance with Federal, State, and consent decree requirements in Baltimore City, the processes do not assess quality, practice issues, or individual caseworker issues and feedback on the results is minimal. A few stakeholders, however, reported that Peer Reviews conducted at the local level do address individual caseworker issues. Caseworkers are provided with feedback from peer reviews and are expected to make any necessary changes to the cases. A few stakeholders expressed the opinion that the MD-CFSR findings drive change in policy and resulted in improvements to the child welfare system in Maryland. Some State-level stakeholders reported that the State is in the process of redesigning the QA process.

**IV. STAFF AND PROVIDER TRAINING**

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2	3	4X

## **Status of Staff and Provider Training**

Maryland is in substantial conformity with the systemic factor of Staff and Provider Training. The State also was in substantial conformity with this factor in its 2003 CFSR and was not required to address this factor in its Program Improvement Plan.

### **Key Findings of the 2009 CFSR**

The findings pertaining to the specific items assessed under Staff and Provider Training are presented and discussed below.

**Item 32. The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services**

  X   Strength           Area Needing Improvement

Item 32 is rated as a Strength. The State provides competency-based child welfare training to new caseworkers and ensures that caseworkers are trained on relevant issues prior to assuming a full caseload. Caseworkers are required to pass a knowledge test at the completion of each training module and the State tracks completion of modules and performance on the knowledge test. This item also was rated as a Strength in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, the Child Welfare Academy (CWA) was established in collaboration with the University of Maryland School of Social Work. The CWA established a comprehensive set of knowledge, skill, and aptitude competencies for child welfare professionals that serve as the basis for the pre-service training curricula. Initial training for caseworkers and supervisors is divided into six pre-service training modules and includes the following:

- Classroom instruction with a scripted written curriculum
- Web-based learning and assignments
- Skill-building exercises
- Mentoring by the caseworker's supervisor

The Statewide Assessment reports that Maryland statute requires that each trainee be given a test based on the content area immediately following the delivery of each module of pre-service training. The department maintains a database to track each new employee's progress in participating in pre-service training and achieving a passing grade within his/her probation period of 6 months. Of the 1,961 pre-service tests given in FY 2008 to new caseworkers and supervisors, the overall pass rate for first administration exams was 92.1 percent. Individuals who are not successful on the first attempt are given two additional opportunities to pass each module within the first 6 months of employment. New staff must pass the competencies test prior to being granted permanent employment status. All LDSS offices have a training liaison who keeps a record of the trainings (pre-service and in-service) each staff person receives.

The Statewide Assessment reports that pre-service training is offered every 3-4 weeks depending on hiring frequency, with a maximum of 24 trainees allowed in each training class. The pre-service training is delivered over approximately 7 weeks with 96 contact hours. New caseworkers and supervisors in Baltimore City receive additional training relevant to requirements of the court-supervised consent decree.

As indicated in the Statewide Assessment, all new and transitioning staff are required to attend training on the MD CHESSIE system in an automated environment that allows new staff to practice inputting and accessing child welfare data in relation to a particular business activity or task.

According to the Statewide Assessment, DHR/SSA has established partnerships with four State universities for the education of prospective child welfare practitioners in both B.S.W. and M.S.W. programs. These students receive financial stipends to assist with the cost of tuition/books and sign a legally binding agreement to accept employment in Maryland's public child welfare programs after graduation. The Statewide Assessment reports that more than 200 students have participated in this title IV-E program from FY 2006 through FY 2008, and 90 percent of these students have fulfilled their employment obligations.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review offered various opinions on the quality of pre-service training for new caseworkers. Many stakeholders commenting on this item during the onsite CFSSR expressed the opinion that the State is generally effective in providing comprehensive training for new caseworkers. Various stakeholders identified the following strengths of the State's pre-service training program.

- CWA provides the training.
- Pre-service training is offered on a frequent basis.
- New caseworkers must pass the competency test for each module.
- New caseworkers generally do not assume a full caseload until the successful completion of pre-service training.
- New caseworkers are assigned cases gradually.
- Mentoring by veteran caseworkers and supervisors is part of the training process.
- New caseworker training is tracked through the DHR Central Office.

Despite these strengths, a few stakeholders expressed the opinion that pre-service training does not adequately prepare new caseworkers for their jobs. Additionally, most stakeholders commenting on MD CHESSIE training for new caseworkers expressed the opinion that the training was inadequate and was not specialized to specific roles within the agency.

Stakeholders in Baltimore City reported that new caseworkers are assigned to the Incubation Unit, which prepares them for service in the Baltimore. New caseworkers generally stay in this unit for about 12 weeks while completing pre-service training and receiving their initial caseload.

**Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP**

  X   Strength           Area Needing Improvement

Item 33 is rated as a Strength. The State requires 12 hours of ongoing training for all caseworkers and supervisors. Ongoing training is provided primarily by the CWA and community and State resources and is tracked by the LDSS. This item was rated as a Strength in Maryland's 2003 CFSR.

**Statewide Assessment Information**

According to the Statewide Assessment, caseworkers and supervisors are required by State statute to participate in at least 12 hours of in-service training per year. In-service training is provided by the CWA, the SSA's central office, and LDSS.

The Statewide Assessment reports that DHR/SSA caseworkers and supervisors have over 200 ongoing training opportunities from which they can choose. Additionally, the CWA purchases advanced professional training courses for individual veteran caseworkers, supervisors, and administrators.

As indicated in the Statewide Assessment, the DHR Work Study Program provides an opportunity for current DHR staff to obtain a B.S.W. or M.S.W. degree. Participants are required to sign an Obligated Service Agreement to continue to work for DHR/SSA after the completion of their degree requirements, at the rate equal to 1.5 months for each month of participation in the program.

**Stakeholder Interview Information**

Most stakeholders commenting on this item during the Onsite Review indicated that ongoing training is required for caseworkers and supervisors and that ongoing training hours are tracked by the LDSS. Stakeholders expressed different opinions, however, with regard to the availability of ongoing training opportunities.

While most stakeholders expressed the opinion that there are multiple training opportunities through CWA and community and State resources for all caseworkers and supervisors, a few stakeholders expressed the opinion that new trainings are not available for supervisors or for veteran caseworkers.

**Item 34. The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children**

  X   Strength           Area Needing Improvement

Item 34 is rated as a Strength. Information from the Statewide Assessment and stakeholders indicate that the State provides initial and ongoing training for foster and adoptive parents and has training requirements for private agency foster homes and group care facility staff that are monitored by OLM. This item also was rated as a Strength in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, resource parents must receive pre-service training and in-service training to obtain and maintain approval. For pre-service training the State offers 27 hours of Parent Resources for Information, Development, and Education (PRIDE) training. Teams of LDSS staff and resource parents specifically trained on the PRIDE training model deliver pre-service training locally. Prospective foster and adoptive parents are dually approved and referred to as resource families. The Statewide Assessment, reports that 6 hours annually of in-service training are required and that the training is provided through contracts with professional organizations. A printed schedule of course content, dates, and locations of training is provided to resource families.

The Statewide Assessment reports that private provider foster parents are required to meet the same training requirements as public agency foster parents. Group care contractors are required by regulations governing their licensing to address certain topics in training. The OLM monitors personnel records to ensure that each staff person has received mandated training. Pre-service and in-service training includes an evaluation tool that is used to determine whether the training offered has met the needs of the resource parent and to identify the need for additional training.

As reported in the Statewide Assessment, each resource family has a resource caseworker who monitors compliance with in-service training hours. Those homes found to be out of compliance at the time of the annual reconsideration are placed on hold and cannot receive new placements until they have met the training requirement.

The State has partnered with the University of Maryland, Baltimore, School of Social Work and the CWA to provide extensive advanced in-service training opportunities for resource families. The advanced in-service trainings are held at the university and at LDSS throughout the State. All trainings are held on Saturday.

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the State provides initial training for foster and adoptive parents through the 27-hour PRIDE curriculum, which is facilitated by LDSS staff. According to Baltimore County stakeholders, foster parents in that county are required to attend a 3-hour training on Family Decision Making in addition to the 27-hour PRIDE training. Completion of initial training hours is tracked by the LDSS. Many stakeholders expressed the opinion that although the information provided in the initial training is practical, it does not adequately prepare foster parents for the reality of fostering.

Most stakeholders commenting on ongoing training for foster parents expressed the opinion that ongoing training is readily available to foster parents through various forums. However, a few stakeholders raised the concern that, although a wide array of training is available, the trainings do not always address issues relevant to the children in the foster homes. Various stakeholders identified the following training needs for foster parents:

- Assisting foster children with their education
- Managing aggressive youth
- Assisting youth with IL skills
- Parenting teens

According to a couple of stakeholders, training requirements for CPA foster parents and residential treatment center staff includes 40 hours of training and includes core requirements as indicated in the State regulations.

**V. SERVICE ARRAY AND RESOURCE DEVELOPMENT**

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

**Status of Service Array and Resource Development**

Maryland is not in substantial conformity with the systemic factor of Service Array and Resource Development. The State also was not in substantial conformity with this factor in its 2003 CFSR and was required to address this factor in its Program Improvement Plan.

**Key Concerns From the 2003 CFSR**

The following concerns were identified in the 2003 review:

- The State had critical gaps in its service array, including dental and mental health services, substance abuse treatment, bilingual services, and services for youth transitioning from residential facilities and to independence.
- Services were not consistently accessible to children and families on a statewide basis.
- Urban communities had a wider array of services than rural communities; however, even in urban communities there were significant service gaps, particularly with regard to dental and mental health services.

To address these concerns, the State implemented the following strategies:

- Trained available caseworkers, foster parents, and providers on identifying services needed by youth to transition to independence
- Provided LDSS staff training on Provision of Service to Clients with Limited English Proficiency and provided translation resources accessible to staff
- Collaborated with stakeholders and LDSS staff on mental health and substance abuse issues and services
- Collaborated with the NRCOI to assess the child and family service array and developed a plan to improve quality and accessibility of services so that each LDSS developed a Resource Development Plan to address needs in the jurisdiction
- Identified and trained available staff to conduct service array assessments

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

### **Key Findings of the 2009 CFSR**

The findings pertaining to the items assessed under Service Array and Resource Development are presented and discussed below.

**Item 35. The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency**

  **X**   **Strength**             **Area Needing Improvement**

Item 35 is rated as a Strength. Maryland has an array of services that addresses the safety, permanency, and well-being needs of children and families. This item was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, Resource Development and Support Services works with each LDSS and stakeholders to identify and develop strategies to improve the array of services available to support children and families in achieving safety, permanency, and well-being. The Statewide Assessment reports that all LDSS have just completed or are in the process of conducting a service array assessment of the services available in their jurisdictions. Once the Central Office receives each jurisdiction's assessment, the State will formulate a statewide services array assessment.

### **Stakeholder Interview Information**

Most stakeholders commenting on this during the onsite CFSR expressed the opinion that the State has services in place. Several stakeholders expressed the opinion that mental health, dental, and medical service accessibility has improved for young adults aging

out of foster care because of their eligibility for Medicaid until the age of 21. Additionally, older youth/young adults are eligible for education assistance and free college tuition until the age of 23.

Many stakeholders reported that two initiatives in the State are addressing service array issues. Both of these initiatives, 1000 by 10 and Place Matters, address the need for more foster home placements for children in foster care. Place Matters also addresses the need for more relative placements and more support services for resource families.

According to several stakeholders, each jurisdiction in the State has recently completed a service array assessment. The results of the assessment, according to stakeholders, identified that services are available but that accessibility is sometimes a problem (this will be discussed further in item 36).

**Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State’s CFSP**

Strength       Area Needing Improvement

Item 36 is rated as an Area Needing Improvement. Services provided by the State are not accessible to families and children in all jurisdictions. There are waiting lists for key services such as dental, substance abuse treatment, and housing services. This item also was rated as an Area Needing Improvement in Maryland’s 2003 CFSR.

**Statewide Assessment Information**

According to the Statewide Assessment, the NRCOI provided technical assistance to Maryland in the following areas:

- Conducting an assessment of existing child and family service arrays within each local jurisdiction
- Preparing and implementing a Resource Development Plan within each local jurisdiction

The Statewide Assessment notes that these processes required the active, engaged participation of a wide variety of community stakeholders in each local community, such as teachers, law enforcement, private sector vendors, health-care providers, and consumers of services, in order to conduct the assessment and develop strategies to address challenges and weaknesses in the child and family service array. The result of these efforts was a Service Array Process and Resource Development Plan in all areas of the State. At the time of the Statewide Assessment, the following top-five services were not readily accessible across the State and were being addressed by the Service Array Process and Resource Development Plans throughout the State:

- Housing
- Mental health
- IL services
- Substance abuse treatment
- Workforce development

Additionally, according to the Statewide Assessment, families and agencies reported a lack of transportation as a significant barrier to obtaining services, particularly in rural areas.

### **Stakeholder Interview Information**

Many stakeholders commenting on this item during the onsite CFSR indicated that each jurisdiction in the State conducted a service array assessment and is in the process of developing a plan to address the gaps indicated in its assessment. Various stakeholders expressed the following opinions with regard to accessibility of services.

- Accessibility of services is better in urban areas than it is in rural areas.
- The lack of transportation in some areas often restricts access to services.
- Families that do not have private insurance or Medicaid often cannot access services, and services to families with private insurance are frequently limited due to insurance policy restrictions.

In addition, various stakeholders across the three sites indicated that many services, including those below, are available in the State but frequently have a waiting list:

- Dental services
- Substance abuse treatment services
- Section 8 housing
- Speech therapy

Stakeholders also identified the following services as insufficient to meet the need:

- Affordable child care
- Post-adoption services
- Foster homes/respice care
- Mental health services for adults and children
- Substance abuse evaluation and treatment
- Evaluation, treatment, and placement resources for sexual abuse victims and offenders
- Visitation services
- Domestic violence services
- IL services
- Specialized medical services
- Public defenders for parents
- Culturally competent services
- Trauma focused treatment

**Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency**

     Strength        X   Area Needing Improvement

Item 37 is rated as an Area Needing Improvement. The Statewide Assessment reports that the services and supports to families that are available in the State are not always tailored to meet the individualized needs of children and families. A specific concern pertained to gender-specific and culturally-appropriate services and supports. This item was rated as a Strength in Maryland’s 2003 CFSR.

**Statewide Assessment Information**

According to the Statewide Assessment, each LDSS is responsible for ensuring that birth families participate in an individualized, strengths-based, family-focused, culturally responsive assessment process and that service plans are individualized to meet the family’s unique needs. All LDSS receive yearly funding used to support individualized service plans. However, the Statewide Assessment also reports that the available services and supports are not always tailored to meet the individualized needs of children or families, specifically gender-specific and culturally appropriate services and supports.

**Stakeholder Interview Information**

Some stakeholders commenting on this item during the Onsite Review expressed the opinion that individualizing services varies based on the assigned caseworker and that referrals are sometimes provided to services available in the community as opposed to services the family may actually need. Several stakeholders reported that flexible funds are available to individualize services for children and families. A few stakeholders expressed different opinions about the availability of culturally sensitive services in the State.

**VI. AGENCY RESPONSIVENESS TO THE COMMUNITY**

Rating of Review Team Regarding Substantial Conformity				
	Not in Substantial Conformity		In Substantial Conformity	
Rating	1	2	3	4X

**Status of Agency Responsiveness to the Community**

Maryland is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. The State also was in substantial conformity with this systemic factor in its 2003 CFSR and was not required to address the factor in its Program Improvement Plan.

## Key Findings of the 2003 CFSR

The findings pertaining to the items assessed under Agency Responsiveness to the Community are presented and discussed below.

**Item 38. In implementing the provisions of the CFSP, the State engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP**

  X   Strength             Area Needing Improvement

Item 38 is rated as a Strength. The State has worked cooperatively with stakeholders including providers, consumers, and government agencies to implement the goals and objectives of the CFSP. This item also was rated as a Strength in Maryland's 2003 CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, Maryland developed the title IV-B CFSP accordance with the Federal regulations. The State has engaged a wide variety of agencies and community stakeholders to both explain and ensure the quality of the services provided to children and families. Additionally, the CFSP is made available for review by stakeholders before its publication.

### Stakeholder Interview Information

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that DHR/SSA works closely with other agencies and providers in the identification of strategies to address key problems. A few stakeholders reported that input into the CFSP was sought via workgroups, surveys, and focus groups. A few stakeholders reported that the DHR/SSA administration was very open to input from other agencies and stakeholders. A couple of stakeholders reported that LDSS Directors are provided a copy of the CFSP and provide feedback as needed.

**Item 39. The agency develops, in consultation with these representatives, Annual Progress and Services Reports pursuant to the CFSP**

  X   Strength             Area Needing Improvement

Item 39 is rated as a Strength. According to stakeholders and the Statewide Assessment, the Annual Progress and Services Report (APSR) is completed with input from various stakeholders. This item was rated as a Strength in Maryland's CFSR.

### Statewide Assessment Information

According to the Statewide Assessment, DHR/SSA creates the APSR according to Federal guidelines. The Statewide Assessment reports that the APSR is the result of an interim review of the progress made in the previous year toward accomplishing the goals and objectives in the CFSP.

### **Stakeholder Interview Information**

The two stakeholders commenting on the APSR during the onsite CFSR expressed the opinion that the DHR/SSA meets regularly with stakeholders to solicit input for the APSR.

### **Item 40. The State's services under the CFSP are coordinated with services or benefits of other Federal or Federally-assisted programs serving the same population**

  X   Strength             Area Needing Improvement

Item 40 is rated as a Strength. The State coordinates services with other Federal and Federally-assisted programs. This item was rated as a Strength in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, DHR/SSA collaborates with the following programs that serve the same population:

- Place Matters collaborators
- The Baltimore American Indian Center
- FCCIP
- The Provider Council
- The Children's Cabinet
- DHMH
- Governor's Office on Children
- The Maryland Foster Parent Association
- The Maryland Chapter of the American Academy of Pediatrics
- The University of Maryland Dental School
- The Maryland Department of the Environment
- Maryland's Managed Care Organizations
- Department of Juvenile Services
- Department of Education

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State generally is effective in the coordination of services of Federal and Federally-assisted programs for children and families. Additionally, many stakeholders expressed the opinion that the current administration is open to collaboration.

In addition to the program/agencies indicated in the Statewide Assessment, stakeholders also reported that DHR/SSA collaborates with the following agencies:

- Medicaid
- Temporary Assistance for Needy Families
- University of Maryland Innovations Program
- Head Start
- Department of Labor, Licensing, and Regulations
- Department of Disabilities

## VII. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

### Status of Foster and Adoptive Parent Licensing, Recruitment, and Retention

Maryland is not in substantial conformity with this systemic factor. The State was in substantial conformity with this factor in its 2003 CFSR and was not required to address this factor in its Program Improvement Plan.

### Key Findings of the 2003 CFSR

The findings pertaining to the items assessed under Foster and Adoptive Parent Licensing, Recruitment, and Retention are presented and discussed below.

**Item 41. The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards.**

  X   Strength           Area Needing Improvement

Item 41 is rated as a Strength. Information in the Statewide Assessment and from stakeholders indicate that the State has comprehensive written regulations and standards for foster family homes and child care institutions in place. This item was rated as a Strength in Maryland’s 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, the State has written regulations that govern the operation of private child placement agencies. Agencies providing adoption, foster care, treatment foster care and IL services for children must receive a license from the State's OLM. Additionally, this office provides regular monitoring and biennially re-licensure.

As indicated in Statewide Assessment, the resource parent approval process includes a home study and documentation related to medical examinations, criminal and protective services background checks, child support clearance, and home safety. The LDSS must complete the home study within 90 calendar days, except when there are delays caused by crisis, problems, or ambivalence in the family. The LDSS must conduct annual reconsiderations for each resource home. The reconsiderations determine continuing compliance with the resource home regulations. When the reviews are completed, the LDSS will decide to reapprove or deny approval of resource homes before the expiration to prevent interruption of care.

According to the Statewide Assessment, relative placement caregivers must be evaluated and approved by the LDSS based on an assessment of the family home, the background (both criminal and CPS) of the family members, and the health status of the family members. Relative placement caregivers can apply for foster care licensing; however, they are subject to the same licensing standards as non-relative foster parents.

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the State has standards for family foster homes and child care facilities that are effective and comprehensive. They noted that the standards the State has established include training, health checks, criminal history checks, CPS checks, as well as fire and health department inspections of the home. Stakeholders noted that reconsiderations are conducted on foster homes annually and re-licensure on child care facilities occurs biennially with a mid-term evaluation occurring annually.

According to some stakeholders in Baltimore City, there was a backlog of resource home initial approvals and reconsiderations.

### **Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds**

Strength       Area Needing Improvement

Item 42 is rated as an Area Needing Improvement. According to the information in the Statewide Assessment and stakeholders, standards are not consistently applied to all approved foster family homes or child care institutions. The State was found not to be in substantial compliance with Federal child and provider eligibility requirements during the recent title IV-E Eligibility Review. According to stakeholders, one reason the State was found not to be in compliance was that some children were placed in foster homes prior to the completion of CPS clearances on adults in the home. This item was rated as a Strength in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, the Maryland title IV-E Eligibility Review was conducted June 16-20, 2008. Because the number of error cases identified exceeded four, the State was found not to be in substantial compliance with Federal child and provider eligibility requirements for the period of April 1, 2007, through September 30, 2007.

According to the Statewide Assessment, the regulations and policies are consistently applied throughout the State for both LDSS and the private providers.

### **Stakeholder Interview Information**

A few stakeholders commenting on this item during the Onsite Review indicated that one reason the State did not pass the most recent title IV-E Eligibility Review was that CPS clearances were not consistently completed and documented prior to placing children in resource homes and residential facilities.

Stakeholders expressed different opinions on the consistency of standards. Most stakeholders expressed the opinion that standards are applied consistently to all approved resource homes, including relative resource homes. A few stakeholders expressed the opinion that some regulations/standards are not consistently applied across jurisdictions.

### **Item 43. The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children**

  **X**   Strength             Area Needing Improvement

Item 43 is rated as a Strength. Information in the Statewide Assessment and from stakeholders indicates that the State provides for background checks and fingerprinting as a component for all licensed foster and adoptive placements, including relatives and child care institution staff. This item was rated as a Strength in Maryland's 2003 CFSR.

### **Statewide Assessment Information**

According to the Statewide Assessment, all foster parents, including relatives and other adults living in the foster homes, must have criminal background checks prior to a child being placed in their home. Additionally, all employees of child placement agencies and child care institutions are required to have a criminal history check prior to employment. Negative results cannot be waived if there is a felony conviction in the previous 5 years, or any conviction for a major felony.

Kinship placements require that the background checks be submitted even though a child may already be placed in the home. Negative results cannot be waived if there is a felony conviction in the previous 5 years, or any conviction for a major felony

The State or local agency that applies for Federal and State criminal background checks receives alerts from the State when there has been an update to the criminal history. Additionally, if a CPS investigation is initiated against a person who has received a criminal history check, the file is tagged and an alert is sent to the local agency who originally requested the background check.

**Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed the opinion that the State requires background checks and criminal history checks for all licensed placement providers and for kinship homes. Background checks are completed on other adults over the age of 18 residing in any resource family or kinship home. A few stakeholders reported that they receive updates if a foster parent is arrested after the initial fingerprint inquiry.

**Item 44. The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed**

  X   Strength             Area Needing Improvement

Item 44 is rated as a Strength. Information in the Statewide Assessment and from stakeholders indicates that the State has an identifiable statewide recruitment and retention plan, 1000 by 10. Additionally, all LDSS have recruitment plans that are monitored by the DHR/SSA. This item was rated as a Strength in Maryland’s 2003 CFSR.

**Statewide Assessment Information**

According to the Statewide Assessment, all LDSS must submit Local Recruitment Plans for approval and the Department will monitor the local jurisdictions’ progress in meeting their recruitment goals. The Statewide Assessment also reports that 1000 by 10 focuses on Maryland’s need to recruit appropriate family settings for children in DHR’s care and custody. The focus of this plan is to develop resources for children within their communities and broaden the diversity of resource home options.

As noted in the Statewide Assessment, DHR recognizes that adolescents are not being adequately served by the current population of foster parents in the state. Therefore, local and statewide recruitment efforts have been targeting foster homes that are able to accommodate adolescents. The Statewide Assessment indicates that child-specific recruitment campaigns have been highly successful in locating resources for older children and children with special needs.

**Stakeholder Interview Information**

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the LDSS are effective in recruiting to meet the needs in their respective jurisdictions. Several Baltimore County and Baltimore City stakeholders reported that recruitment efforts are targeted by zip codes and police districts, respectively, to meet the ethnic and racial diversity of children in foster care. Various stakeholders at the review sites indicated that recruitment efforts include media advertisements, booths at community events, websites, the One Church One Child program, and the Heart Gallery.

Additionally, the State currently has a recruitment initiative that is called 1000 by 10. According to some stakeholders, the State is using this initiative to have 1000 approved, active foster homes by the year 2010. Several stakeholders commenting on this initiative expressed the opinion that the State would have a difficult time reaching this goal.

**Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children**

     Strength        X   Area Needing Improvement

Item 45 is rated as an Area Needing Improvement. Information from stakeholder interviews conducted during the onsite CFSR indicate that Maryland does not effectively utilize State and national adoption exchanges or Interstate Compact on the Placement of Children (ICPC) to obtain placements for children across counties and outside the State. This item was rated as an Area Needing Improvement in Maryland's 2003 CFSR.

**Statewide Assessment Information**

According to the Statewide Assessment, the State has in place a mechanism to facilitate timely adoptive placements for waiting children through the MARE database. Once cases are registered with photos, they are downloaded to AUK for registration in the AUK database. Also, in 2006, Maryland launched its first Heart Gallery. As of April 2008, of the 63 children presented through the Heart Gallery, 28 children had an identified resource, 19 were in the pre-finalization process of adoption, and 9 children had finalized adoptions.

As reported in the Statewide Assessment, all placements of children for out-of-home placement or as a preliminary to possible adoption in other States are processed through the Maryland ICPC office.

**Stakeholder Interview Information**

Some State-level stakeholders commenting on this item during the Onsite Review reported that at the time of the Onsite Review, MARE and AUK were not interfacing correctly; therefore, children were not posted on the AUK website. Additionally, the stakeholders reported that there were not as many children on MARE as were free for adoption.

According to several stakeholders, the State utilizes the Heart Gallery to promote adoptive placements across the State. A few stakeholders commenting on this item expressed the opinion that the State is effective in promoting intrastate placements. Several stakeholders in Baltimore City noted the use of the ICPC to facilitate placements across State lines. However, these stakeholders also expressed the opinion that caseworkers and supervisors do not understand the ICPC process and training on ICPC is not available at the local level.