

Citizens Review Board For Children



ANNUAL REPORT

FISCAL 2021

(July 1st 2020 - June 30th 2021)

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Introduction

Maryland's Citizens Review Board for Children (CRBC) is comprised of volunteer citizens and Department of Human Services (DHS) staff that provide child welfare expertise, guidance and support to the State and Local Boards.

CRBC is charged with examining the policies, practices and procedures of Maryland's child protective services, evaluating and making recommendations for systemic improvement in accordance with §5-539 and § 5-539.1 and the Federal Child Abuse and Treatment Act (CAPTA) (Section 106 (c)).

CRBC reviews cases of children and youth in Out-of-Home Placement, monitors child welfare programs and makes recommendations for system improvements. Although CRBC is housed within the DHS organizational structure, it is an independent entity overseen by its State Board.

There is a Memorandum of Agreement (MOA) between the Department of Human Services (DHS), the Social Services Administration (SSA) and CRBC that guides the work parameters by which CRBC and DHS function regarding CRBC review of cases.

The CRBC State Board reviews and coordinates the activities of the local review boards. The board also examines policy issues, procedures, legislation, resources and barriers relating to Out-of-Home Placement and the permanency of children. The State Board makes recommendations to the General Assembly around ways of improving Maryland's child welfare system.

Since January 2021, the local Boards have conducted virtual instead of in person case reviews of children in Out-of-Home Placement for all local department of social services and in every jurisdiction. Individual recommendations regarding permanency, placement, safety and well-being are sent to the local juvenile courts, the local department of social services and interested parties involved with the child's care.

This CRBC FY2021 Annual Report contains CRBC's findings from our case reviews, advocacy efforts, CPS panel activities and recommendations for systemic improvements.

On behalf of the State Board of the Maryland Citizens Review Board for Children (CRBC), it's staff and citizen volunteer board members, I present our Fiscal 2021 Annual Report.

Sincerely,

Nettie Anderson-Burrs
State Board Chair

Executive Summary

The COVID-19 Pandemic began during the third quarter of fiscal year 2020. As a result, children, youth and families were exposed to additional stressors. The state of emergency, mandatory telework and stay at home orders in addition to day care and school closures, unemployment, housing and food insecurities likely added trauma for the most vulnerable children in Maryland.

This makes it even more imperative to ensure that efforts to support and provide services are trauma informed. The lingering effects have impacted many systems and highlighted others including the need for a capable child welfare workforce that is supported with the necessary resources to ensure appropriate oversight of Maryland's most vulnerable children and families' needs.

Demographic changes due to retirements and child welfare staff turnover likely resulting from competitive processes impacted by hiring delays, salary, advancement opportunities, childcare and employment flexibility impacts the quality of services and ultimately safety, well-being, permanency.

For older youth aging out of care, preparedness as they transition as emerging adults is impacted. Expanding and investing in innovative strategies for workforce recruitment, development and retention is necessary to support the challenging and necessary work of child welfare staff.

During fiscal year 2021, the Citizens Review Board for Children reviewed 385* cases of children and youth in Out-of-Home Placements. Reviews are conducted per a work plan developed in coordination with DHS and SSA with targeted review criteria based on Out-of-Home Placement permanency plans. This report includes Out-of-Home Placement review findings and CRBC activities including legislative advocacy and recommendations for system improvement.

Health and Education Findings for statewide reviews include:

CRBC conducted virtual reviews of local department of social services cases statewide. Reviews included Google Meet interviews with local department staff and interested parties identified by the local department of social services such as parents, youth, caregivers, providers, CASA, therapists and other relevant parties to individual cases. At the time of the review local review boards requested information and documentation regarding education and health including preventive physical, dental and vision exams. Reviewers also considered medication reviews, treatment recommendations, health and mental health follow up appointments and referrals recommended by medical providers.

- The local boards found that for 163 (42%) of the 385 total cases reviewed, the health needs of the children/youth had been met.
- Approximately 167 (43%) of the children/youths were prescribed medication.
- Approximately 131 (34%) of the children/youths were prescribed psychotropic medication.
- The local boards found that there were completed medical records for 110 (29%) of the total cases reviewed.
- The local boards agreed that 257 (67%) of the children/youth were being appropriately prepared to meet educational goals.

Demographic findings for statewide reviews include:

- 245 (64%) of the children/youth were African American.
- 118 (31%) of the children/youth were Caucasian.
- 178 (46%) of the children/youth were male.
- 207 (54%) of the children/youth were female.

CRBC conducted 139 Reunification reviews. Findings include:

- 38 cases (27%) had a plan of reunification for 3 or more years.
- The local boards agreed with the placement plan for 106 (76%) of the cases reviewed.
- The local boards found that the local departments made efforts to involve the family in case planning for 112 (81%) of the cases reviewed.
- The local boards found that service agreements were signed for 28 (20%) of the eligible cases reviewed.
- The local boards agreed that the signed service agreements were appropriate to meet the needs of the children/youths.

CRBC conducted 64 Adoption reviews. Findings include:

- 17 (27%) of the 64 cases had a plan of adoption for 3 or more years.
- The local boards agreed with the placement plan for 61 (95%) of the cases reviewed.
- The local boards identified the following barriers preventing the adoption process or preventing progress in the child's case:
 - Pre-adoptive resources not identified.
 - Child in pre-adoptive home, but adoption not finalized.
 - Efforts not made to move towards finalization.
 - Child does not consent.
 - Appeal by birth parents.
 - Other court related barrier.

CRBC conducted 160 (APPLA) Another Planned Permanent Living Arrangement reviews. APPLA is the least desired permanency plan and should only be considered when all other permanency options have been thoroughly explored and ruled out. APPLA is often synonymous with long term foster care. Many youths with a permanency planning goal of APPLA remain in care until their case is closed when they age out of the foster care system. Findings include:

- 51 (32%) of the 160 cases had a plan of APPLA for 3 or more years.
- The local boards agreed with the permanency plan of APPLA in 99% of the 160 cases statewide. 158 of the cases reviewed with a permanency plan of APPLA were youth between the ages of 17-20.
- A permanent connection is an identified person that a youth can rely on for assistance with support, advice and guidance as they deal with the day-to-day life circumstances that adulthood can bring about on a regular basis. The local boards agreed that for 149 (93%) of

the 160 cases of youth with a permanency planning goal of APPLA that a permanent connection had been identified, and the local boards agreed that the identified permanent connections were appropriate for 146 (91%) of the 160 cases.

Barriers/Issues

The local boards identified the following barriers to permanency/issues:

- No service agreement with parents
- No current safety or risk assessment
- Lack of concurrent planning
- Lack of follow-up (general)
- Youth placed outside of home jurisdiction
- Youth has not been assessed for mental health concerns
- Issues related to substance abuse
- Other service resource barrier
- Other physical health barrier
- Youth refuses mental health treatment including therapy
- Other placement barrier
- Other child/youth related barrier
- Non-compliance with service agreement
- Child has behavior problems in the home
- Youth non-compliant with medication
- Youth engages in risky behavior

Ready By 21 (Transitioning Youth)

Age of Youth (14 years and older all permanency plans = 256 cases)

- 80 (31%) of the 256 youths reviewed were between 14-16 years old.
- 79 (31%) of the 256 youths reviewed were between 17-19 years old.
- 104 (41%) of the 256 youths reviewed were 20 years old.

Independent Living skills (256 cases)

- The local boards agreed that 97 (38%) of the 256 eligible youths were receiving appropriate services to prepare for independent living.

Employment (256 cases)

- The local boards found that 85 (33%) of the 256 eligible youths were employed or participating in paid or unpaid work experience.
- The local boards agreed that 106 (41%) of the 256 eligible youths were being appropriately prepared to meet employment goals.

Housing (98 cases)

Transitioning Youth (20 and over with a permanency plan of APPLA or exiting care to independence within a year of the date of review).

- The local boards found that 55 (56%) of the 98 youths had a housing plan specified.
- The local boards agreed that 61 (62%) of the 98 youths were being appropriately prepared for transitioning out of care.

Concurrent Planning

Concurrent planning is an approach that seeks to eliminate delays in attaining permanent families for children in foster care. In concurrent planning, an alternative permanency plan or goal is pursued at the same time rather than being pursued after reunification has been ruled out. The Adoption and Safe Families Act (ASFA) of 1997 provided for legal sanctioning of concurrent planning in states by requiring that agencies make reasonable efforts to find permanent families for children in foster care should reunification fail and stating that efforts could be made concurrently with reunification attempts.

At least 21 states have linked concurrent planning to positive results including reduced time to permanency and establishing appropriate permanency goals, enhanced reunification or adoption efforts by engaging parents and reduced time to adoption finalization over the course of two review cycles of the Federal Child and Family Services Review (Child Welfare Information Gateway, Issue Brief 2012, Children's Bureau/ACYF). DHS/SSA Policy Directive#13-2, dated October 12, 2012 was developed as a result of Maryland reviewing case planning policy including best practices and concurrent planning as part of Maryland's performance improvement plan.

CRBC supports concurrent planning when used in accordance with state policy to achieve goals of promoting safety, well-being and permanency for children in out of home placement, reducing the number of placements in foster care and maintaining continuity of relationships with family, friends and community resources for children in out-of-home care.

According to SSA Policy Directive #13-2 a concurrent plan is required when the plan is reunification with parent or legal guardian, placement with a relative for adoption or custody and guardianship, and guardianship or adoption by a non-relative (prior to termination of parental rights).

The local boards found the following in statewide reviews:

- A total of 33 (8%) of the 385 cases had a concurrent permanency plan identified by the local juvenile courts.
- The local boards found that for 80 (21%) of the 385 cases the local department was engaged in concurrent planning.

* Due to the COVID-19 pandemic and the Governor of Maryland issuing a mandatory teleworking order effective March 13th 2020, case reviews were suspended through 2nd quarter FY2021, which impacted the number of cases reviewed.

CRBC Recommendations to the Department of Human Services

1. Review and develop policies and practices to ensure that they are trauma informed policies.
2. Ensure consistency in the availability and delivery of services to children and youth involved with child welfare statewide by identifying resource needs and gaps to address lack of access.
3. Develop a system to track and monitor health including mental health of children and youth in out-of-home placement.
4. Identify gaps and areas needing improvement in the child welfare workforce. Increase efforts to improve workforce development in order to attain and maintain a highly experienced and skilled workforce to include transfer of knowledge. Develop and implement measures to retain child welfare staff by considering case and workloads, staff development and training, quality of supervision and competitive compensation.
5. Coordination of services across Public Agencies such as Primary Care, Behavioral Health, Medicaid, Juvenile Criminal Systems, Education, and Public Assistance in an effort to improve health needs being met and outcomes for children in Out-of-Home Placement.
6. Ensure adequate in state resources to provide services to children and youth with intensive needs. Children with serious behavioral, emotional, and medical needs that require additional structure not provided in family or other group settings in state, should receive appropriate services and level of support for their own safety and the safety of others and to help improve outcomes.
7. Ensure that concurrent planning occurs to increase the likelihood of establishing the appropriate permanency plan or goal and achieve permanency without undue delay.
8. Explore other permanency options at least every 6 months for children and youth with a permanency plan of APPLA.
9. Increase the number of relative/kin placement and permanency resources.
10. Explore adoption counseling for children and youth that have not consented to adoption.
11. Transitional planning should begin for youth at 14 to include housing, education, employment, and mentoring. Plans should be developed by the youth with the assistance of the Department of Social Services worker and others identified by the youth for support. Engagement of the youth and individuals identified by the youth is important. The plan should build on the youth's strengths and support their needs. While it is important to understand and meet legislative requirements for youth transitional plans, it is crucial that child welfare professionals working with youth view transitional planning as a process that unfolds over time and through close youth engagement rather than as a checklist of items

to accomplish.¹

12. Ensure that youth 14 and older begin to prepare for self-sufficiency by providing resources and opportunities for consistent independent living skills for youth statewide.
13. Ensure that youth are engaged in opportunities to use independent living skills obtained prior to transitioning out of care.
14. Identify housing resources and funding to address the lack of affordable housing options available for aging out youth.
15. Ensure that a specific housing plan is identified for older youth transitioning out of care at least 6 months prior to the anticipated date of discharge or youth's 21st birthday.
16. Increase opportunities for community partnerships to connect, to use life/independent skills, to gain employment experience and to improve affordable housing options for older youth exiting care.

¹Child Welfare Information Gateway <https://www.childwelfare.gov>

Acknowledgements

CRBC would like to acknowledge the commitment, dedication, passion, and service of all stakeholders on behalf of Maryland's most vulnerable children including:

- ★ CRBC Governor Appointed members for their tireless efforts on behalf of Maryland's most vulnerable children and youth. CRBC volunteers have been dedicated and committed to the mission, vision and goals of CRBC, successfully transitioning from conducting in person to 385 virtual case reviews and interviews, providing individual case advocacy.
- ★ The Department of Human Services (DHS)
- ★ The Social Services Administration (SSA)
- ★ The Local Departments of Social Services (LDSS), Baltimore County & Montgomery County (DHHS)
- ★ The State Council on Child Abuse and Neglect (SCCAN)
- ★ The State Child Fatality Review Team (SCFRT)
- ★ The Coalition to Protect Maryland's Children (CPMC)
- ★ Maryland CASA Association
- ★ The Local Juvenile Courts of Maryland
- ★ All Community Partners who strive to improve outcomes for children and youth involved with child welfare

Special Acknowledgements

CRBC would like to thank the following for their leadership, service, attention and efforts to promote safety and well-being for children and youth during Fiscal Year 2021:

- ★ Delegate CT Wilson for sponsoring bills during the legislative session that promote well-being and the prevention of maltreatment including the prevention of child sexual abuse.
- ★ Claudia Remington, SCCAN Executive Director for her advocacy regarding safety, well-being and prevention of child maltreatment, for promoting and supporting ACES education.
- ★ Wendy Lane, MD MPH for her advocacy and supporting recommendations for improvements in health care for children involved with the child welfare system.
- ★ Pat Cronin, Executive Director of The Family Tree, Board and Staff for providing ACES training and community education and for promoting safety, well-being, child protection and prevention of child maltreatment.

SSA Response to the CRBC FY2020 Annual Report

(Reprinted for inclusion in Annual Report)



Larry Hogan, Governor | Boyd K. Rutherford, Lt. Governor | Lourdes R. Padilla, Secretary

June 21st, 2021,

Nettie Anderson-Burrs, Chairperson
Citizens Review Board for Children
1100 Eastern Avenue
Baltimore, Maryland 21221

Dear Ms. Anderson-Burrs:

The Maryland Department of Human Services, Social Services Administration (DHS/SSA) greatly appreciates the work of the Citizens Review Board for Children (CRBC). The CRBC annual report contains significant analytics and qualitative data useful to inform practice improvement and service innovation to enhance outcomes for Maryland's children, youth and families.

The CRBC recommendations to review and develop policies and practices to ensure they are trauma informed, expand our service array, particularly for youth with multifaceted needs are being addressed within our implementation team structure. Through the implementation structure, we are enhancing our concurrent planning strategies, coordination of services and workforce development activities to integrate our Youth Transition Planning (YTP). The case reviews the CRBC utilizes to offer recommendations makes the process invaluable for all.

To specifically address the needs of the older youth population, DHS/SSA is expanding efforts to improve and implement a YTP process that embraces authentic youth engagement and youth-driven plans. DHS/SSA and transitional independent living providers collaborate quarterly to discuss the needs of youth and young adults prior to emancipation to ensure the continuity of experiential learning activities and life skills that lead to successful independence. In addition, SSA has created a workgroup consisting of DHS, services partners and technical assistance partners to draft educational and training strategies for youth and our workforce as youth move through the transitional planning process.

Youth engagement is continually pursued in activities to include the development of Youth Transitional Planning. Youth input and feedback is essential and quite innovative. Among the various forums that promotes authentic youth voice, include but are not limited to local Youth Advisory Boards, State Youth Advisory Board, Family Team Decision Making Meetings, and Local Independent Living Work Groups. Most recently, over 75 youth participated in a Pandemic Relief Virtual Listening Session to identify supportive services and optimal usage of COVID-19 resources for thoughtful immediate access.

DHS/SSA endorses the recommendations for improving permanency outcomes for youth in care and increasing the support networks for children and families. DHS/SSA is developing policies and strategies that redefine the concept of family as more inclusive of kinship resources (including fictive kin) and placing emphasis on relational permanency for older youth, who have a plan of Another Planned Permanent Living Arrangement (APPLA).

The CRBC's careful assessment of our practices is very much appreciated. We are committed to continuing to identify and strategically implement best practices to effectively serve children, youth and families.

We look forward to our ongoing partnership with the CRBC on behalf of children, youth, and families across Maryland.

Respectfully,

A handwritten signature in blue ink, reading "Michelle L. Farr".

Michelle L. Farr, LCSW-C, LICSW
Executive Director, Social Services Administration

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CRBC Program Description

The Citizen Review Board for Children is rooted in a number of core values, which relate to society's responsibility to children and the unique developmental needs of children. We have a strong value of believing that children need permanence within a family, and that their significant emotional attachments should be maintained. We know children develop through a series of nurturing interactions with their parents, siblings and other family members, as well as culture and environment. Therefore, a child's identity or sense of selfhood grows from these relationships.

In addition, we believe children grow and are best protected in the context of a family. If parents or kin are not able to provide care and protection for their children, then children should be placed temporarily in a family setting, which will maintain the child's significant emotional bonds and promote the child's cultural ties.

The CRBC review process upholds the moral responsibility of the State and citizenry to ensure a safe passage to healthy adulthood for our children, and to respect the importance of family and culture.

As case reviewers, CRBC values independence and objectivity, and we are committed to reporting accurately what we observe to make recommendations with no other interest in mind but what is best for children. In addition, CRBC provides an opportunity to identify barriers that can be eradicated and can improve the lives of children and their families: and improve the services of the child welfare system (CRBC, 2013).

The Citizens Review Board for Children consists of Governor appointed volunteers from state and local boards. Currently, there are 35 local review boards representing all 24 jurisdictions (23 counties and Baltimore City). There are currently 159 volunteers serving on local boards, 2 pending appointment by the Governor, 4 applicants pending submission for appointment and 2 pending selection. CRBC reviews cases of children in Out-of-Home Placement, monitors child welfare programs and makes recommendations for system improvements.

The State Board reviews and coordinates the activities of the local review boards. The State Board also examines policy issues, procedures, legislation, resources, and barriers relating to Out-of-Home Placement and the permanency of children. The State Board makes recommendations to the General Assembly around ways of improving Maryland's child welfare system.

The Citizens Review Board for Children supports all efforts to provide permanency for children in foster care. The State Board provides oversight to Maryland's child protection agencies and trains volunteer citizen panels to aid in child protection efforts.

Mission Statement

To conduct case reviews of children in out-of-home care, make timely individual case and systemic child welfare recommendations; and advocate for legislative and systematic child welfare improvements to promote safety and permanency.

Vision Statement

We envision the protection of all children from abuse and neglect, only placing children in out-of-home care when necessary; and providing families with the help they need to stay intact; children will be safe in a permanent living arrangement.

Goals

Volunteer citizens review cases in order to gather information about how effectively the child welfare system discharges its responsibilities and to advocate, as necessary for each child reviewed in out-of-home care.

The Citizens Review Board for Children provides useful and timely information about the adequacy and effectiveness of efforts to promote child safety and well-being, to achieve or maintain permanency for children and about plans and efforts to improve services.

The Citizens Review Board for Children makes recommendations for improving case management and the child welfare system, and effectively communicates the recommendations to decision makers and the public.

Discrimination Statement

The Citizens Review Board for Children (CRBC) renounces any policy or practice of discrimination on the basis of race, gender, national origin, ethnicity, religion, disability, or sexual orientation that is or would be applicable to its citizen reviewers or staff or to the children, families, and employees involved in the child welfare system (CRBC, 2013).

Confidentiality

CRBC local board members are bound by strict confidentiality requirements. Under Maryland Human Services Code § 1-201 (2013), all records concerning out-of-home care are confidential and unauthorized disclosure is a criminal offense subject to a fine not exceeding \$500 or imprisonment not exceeding 90 days, or both. Each local board member shall be presented with the statutory language on confidentiality, including the penalty for breach thereof, and sign a confidentiality statement prior to having access to any confidential information.

CRBC FY2021 Retention, Recruitment, Training and Activities

During FY2021, CRBC continued to utilize recruitment and retention strategies to ensure membership and facilitation of reviews in all 23 counties and Baltimore City. Many of CRBC members have been dedicated and committed to serving on behalf of Maryland's most vulnerable children and youth for numerous years. Ongoing recruitment is necessary to account for some expected reduction to avoid attrition. Passive recruitment efforts continued in order to support CRBC's mission, vision and goals.

In FY2021, 22 members were selected by selection committees in Anne Arundel County (1), Baltimore County (1), Carroll County (2), Frederick County (1), Harford County (1), Kent County (1), Queen Anne's County (2), Montgomery County (1), Prince George's County (1), St. Mary's County (1), Somerset County (2), Washington County (1) and Baltimore City (7) and appointed by the Governor to local out-of-home placement review boards in jurisdictions where they reside. CRBC provided orientation and pre-service training for newly appointed members and in commemoration of National Child Abuse Prevention Month in April 2021 CRBC hosted its 3rd training on Adverse Childhood Experiences (ACES), titled Understanding N.E.A.R. (Neuroscience, Epigenetics, ACES and Resilience) and the CRBC Review Process for CRBC local out-of-home placement review board members and Montgomery County Child Protection Panel Members. The training was facilitated by Matila Sackor-Jones, II, Assistant Director of Community Engagement Services at The Family Tree.

CRBC Individual Case Reviews

As a result of the Pandemic, state of emergency and the Governor's mandatory telework order beginning on March 13, 2020 in the 3rd Quarter of FY2020, in person case reviews, in person recruitment and in person training was suspended. CRBC was successful in developing a process to transition from in person, on site reviews at local departments of social services to virtual reviews. Review pilots were conducted in Charles and Prince George's County in November and December 2020. Scheduled virtual reviews resumed in January 2021 (3rd Quarter of FY2021). A total of 385 individual case reviews were conducted in the 3rd and 4th Quarter of FY2021 (January 1, 2021-June 30, 2021).

Promoting Safety, Well-Being and Permanency

CRBC's priorities remained the safety and well-being of Maryland's most vulnerable children and youth. CRBC facilitated virtual meetings with local department of social services administrators in Baltimore County, Charles County, Queen Anne's County, St. Mary's County and Baltimore City to discuss CRBC review findings, for individual and jurisdictional advocacy. CRBC advocated for resources and support for children and youth, child welfare staff, caregivers and providers and also

participated in virtual meetings with members of the Department of Human Services, Social Services Administration, including with Dr David Rose, DHS/SSA Medical Director, regarding health/mental health and education, Tennille Thomas, DHS/SSA Deputy Executive Director of Placement Services and Performance Monitoring regarding concerns with placement and educational services, Keisha Peterson, DHS/SSA Manager Child and Family Well-Being regarding educational needs of children in foster care and with external child welfare advocates and stakeholders. CRBC also participated in DHS and SSA Advisory Board meetings. Advocacy efforts included safety, well-being, including health/mental health and education, preventive measures for child welfare staff, providers and caregivers, housing for aging out youth, extending care for aging out youth turning 21, COVID-19 guidance and access to information regarding COVID-19, placement resources for youth with intensive needs, child welfare workforce, policy and practices in addition to vacant child welfare positions and workforce development.

Virtual meetings with Department of Human Services and Social Services Administration staff were held to discuss CRBC health and findings and educational concerns. Discussions included the lack of shared health information and documentation, the potential impact on case management, planning, decision making, placement stability and permanency.

Education Advocacy Committee (EAC) Activities

Educational Advocacy

Education is crucial in well-being. It increases opportunities and choices in life due to the skills and confidence gained when appropriate educational services including emotional and mental health services are provided to support a child reaching their full potential.

Educational concerns consequent COVID that have arisen during the CRBC review process prompted the establishment of an Educational Advocacy Committee (EAC) in fiscal year 2021. The committee is a sub-committee of CRBC's State Board and its purpose is to support CRBC's efforts with advocacy around improvement in educational services for children in foster care. The committee will make recommendations to the State Board. The goal is that all of Maryland's children will have access to safe, equitable and sustainable education to support the well-being and success of all of Maryland's children.

This prompted plans for a deeper look of cases including those with Individual Education Plans (IEP) and those cases where a child may be in need of special education services but, as yet, have not been referred.

Also, consideration regarding if there was sufficient examination and review of these cases. Additional considerations include the following:

- The need for data on the number of children within foster care who qualify for special education services.
- The need for every foster child who has been identified as in need of special education to have a parent or person who can function as the parent in an IEP meeting
- Procedures within Department of Human Services (DHS) and Maryland State Department of Education (MSDE) regarding children in foster care
- Residential placement resources for a child who qualifies for special education
- Practices and policies of DHS regarding oversight of IEP development and implementation

The committee engaged in information gathering and a series of meetings with expertise in education and education advocacy during FY 2021 in addition to review of state and federal policies and guidelines.

CRBC FY2021 Legislative Activities

CRBC has a Children's Legislative Activities Committee (CLAC) and is a voting member of the Coalition to Protect Maryland's Children (CPMC).

During the 2021 legislative session CRBC reviewed and weighed in on approximately 49 pieces of legislation and supported 17. Below are some of the bills that CRBC took a position on:

Supported

HB258/SB592- State Child Welfare System – Reporting

HB9: Family Law - Mandatory Reporter Training

SB134/HB263- Civil Actions - Child Sexual Abuse - Definition and Statute of Limitations

SB57/HB748 Family Law - Child Custody and Visitation

SB515/HB48- Criminal Procedure - Registered Sex Offenders - Entry onto School Property

HB401/SB438- Public Schools - Pregnant and Parenting Students - Policies and Reports

HB359/SB437-Maryland Longitudinal Data System - Student Data - Pregnant and Parenting Students

HB439/SB470- Institute for Innovation and Implementation - Pregnant, Expecting, and Parenting Students - Data Collection and Report

HB1121/SB905: Juvenile Services - Workgroup to Develop Evidence-Based, Research-Based, and Culturally Competent Practices

HB1089- Primary and Secondary Education - Expansion of Mental Health Services and Prohibition of School Resource Officers (Police-Free Schools Act)

SB675/HB1036 Child Custody - Cases Involving Child Abuse or Domestic Violence - Training for Judges and Child's Counsel.

HB1122/SB776-Criminal Procedure-Out of Court Statements-Child and Vulnerable Victims

HB771-Public Schools-Centers for Disease Control and Prevention Surveys-Revisions

Opposed

HB893-Foster Parents, Kinship Parents, Pre-Adoptive Parents, and Caregivers Right to Intervene

HB930- Family Law - Removal of Child from Home – Meetings

CRBC continued to advocate with child welfare advocates, stakeholders and legislative representatives for extending the moratorium on extending foster care placements for aging out youth turning 21 during fiscal year 2021 and for youth, placement providers and public access to information related to COVID and services.

CRBC Out-of-Home Placement Case Reviews

Targeted Review Criteria

The Department of Human Services (DHS), formerly the Department of Human Resources (DHR), Social Services Administration (SSA) and the Citizens Review Board for Children (CRBC) together have created a review work plan for targeted reviews of children in out-of-home-placement. This work plan contains targeted review criteria based on out-of-home-placement permanency plans.

Reunification:

- Already established plans of Reunification for children 10 years of age and older. CRBC will conduct a review for a child 10 years of age and older who has an established primary permanency plan of Reunification and has been in care 12 months or longer.

Adoption:

- Existing plans of Adoption. CRBC will conduct a review of a child that has had a plan of Adoption for over 12 months. The purpose of the review is to assess the appropriateness of the plan and identify barriers to achieve the plan.
- Newly changed plans of Adoption. CRBC will conduct a review of a child within 5 months after the establishment of Adoption as a primary permanency plan. The purpose is to ensure that there is adequate and appropriate movement by the local departments to promote and achieve the Adoption.

Another Planned Permanent Living Arrangement (APPLA):

- Already established plans of APPLA for youth 16 years of age and younger. CRBC will conduct a full review of a child 16 years of age and younger who has an established primary permanency plan of APPLA. The primary purpose of the review is to assess appropriateness of the plan and review documentation of the Federal APPLA requirements.
- Newly established plans of APPLA. CRBC will conduct a review of a child within 5 months after the establishment of APPLA as the primary permanency plan. Local Boards will review cases to ensure

that local departments have made adequate and appropriate efforts to assess if a plan of APPLA was the most appropriate recourse for the child.

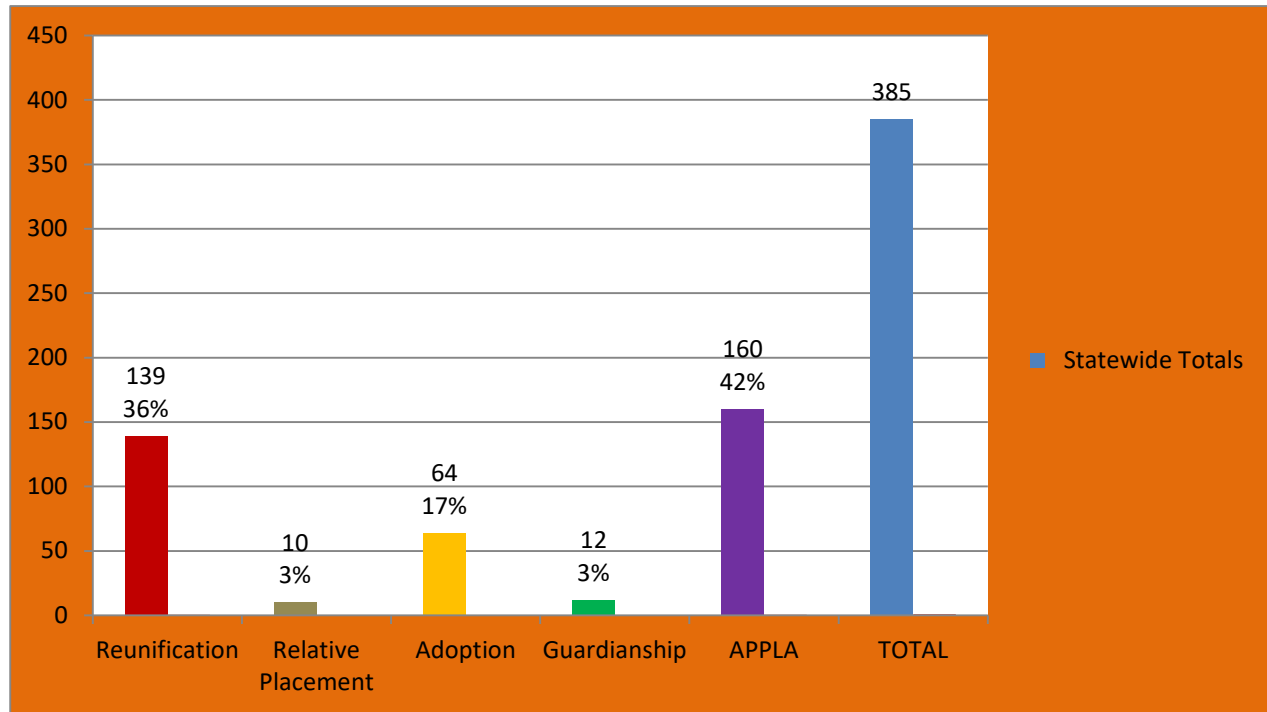
Older Youth Aging Out

- Older youth aging-out or remaining in the care of the State at age 17 and 20 years old. CRBC will conduct a review of youth that are 17 and 20 years of age. The primary purpose of the review is to assess if services were provided to prepare the youth to transition to successful adulthood.

Re-Review Cases:

- Assessment of progress made by LDSS. CRBC will conduct follow-up reviews during the fourth quarter of the current fiscal year of any cases wherein the local board identified barriers that may impede adequate progress. The purpose of the review is to assess the status of the child and any progress made by LDSS to determine if identified barriers have been removed.

CRBC FY2021 Case Review Findings by Permanency Plan



Gender Totals (385)

Male	Female
178 (46%)	207 (54%)

Male

Reunification	Relative Placement(*)	Adoption	Guardianship	APPLA
74 (53%)	6 (60%)	26 (41%)	7 (58%)	65 (41%)

Female

Reunification	Relative Placement(*)	Adoption	Guardianship	APPLA
65 (47%)	4 (40%)	38 (59%)	5 (42%)	95 (59%)

*(Note: Relative Placement is the combined total of Relative Placement for Adoption (3) and Relative Placement for Custody/Guardianship (7))

Ethnicity Overall (385)

African American	Caucasian	Asian	Other
245 (64%)	118 (31%)	5 (1%)	17 (4%)

Age Range by Permanency Plan

[RE] = Reunification

[RA] = Relative Placement for Adoption

[RG] = Relative Placement for Custody & Guardianship

[AD] = Non-Relative Adoption

[CG] = Non-Relative Custody & Guardianship

[AP] = Another Planned Permanent Living Arrangement (APPLA)

AGE RANGE	RE	RA	RG	AD	CG	AP	Totals
age 1 thru 5	16	2	1	23	0	0	42
age 6 thru 10	15	1	0	13	1	0	30
age 11 thru 13	34	0	5	9	2	0	50
age 14 thru 16	55	0	1	17	5	2	80
age 17 thru 19	18	0	0	2	4	55	79
age 20	1	0	0	0	0	103	104
Totals	139	3	7	64	12	160	385

CRBC FY2021 Case Reviews by Jurisdiction & Permanency Plan

Jurn #	County	Reunification	Relative Placement	Adoption	Custody Guardianship	APPLA	TOTAL
01	Allegany	1	0	2	1	3	7
02	Anne Arundel	5	0	1	0	9	15
03	Baltimore County	19	0	5	0	13	37
04	Calvert	2	0	3	0	3	8
05	Caroline	8	0	1	0	0	9
06	Carroll	2	0	1	0	1	4
07	Cecil	2	0	0	0	2	4
08	Charles	3	0	1	3	5	12
09	Dorchester	1	0	0	0	3	4
10	Frederick	2	0	9	0	1	12
11	Garrett	3	0	1	0	0	4
12	Harford	5	0	4	1	7	17
13	Howard	3	0	0	0	5	8
14	Kent	1	0	1	0	0	2
15	Montgomery	30	3	5	2	14	54
16	Prince Georges	14	3	5	1	21	44
17	Queen Anne	1	0	0	0	1	2
18	Saint Mary's	5	0	2	0	0	7
19	Somerset	0	0	0	0	0	0
20	Talbot	0	0	0	0	0	0
21	Washington	1	2	3	0	6	12
22	Wicomico	0	0	0	0	3	3
23	Worcester	0	0	2	0	2	4
49	Baltimore City	31	2	18	4	61	116
24	Statewide Totals	139	10*	64	12	160	385
24	Percentages	36%	3%	17%	3%	42%	100%

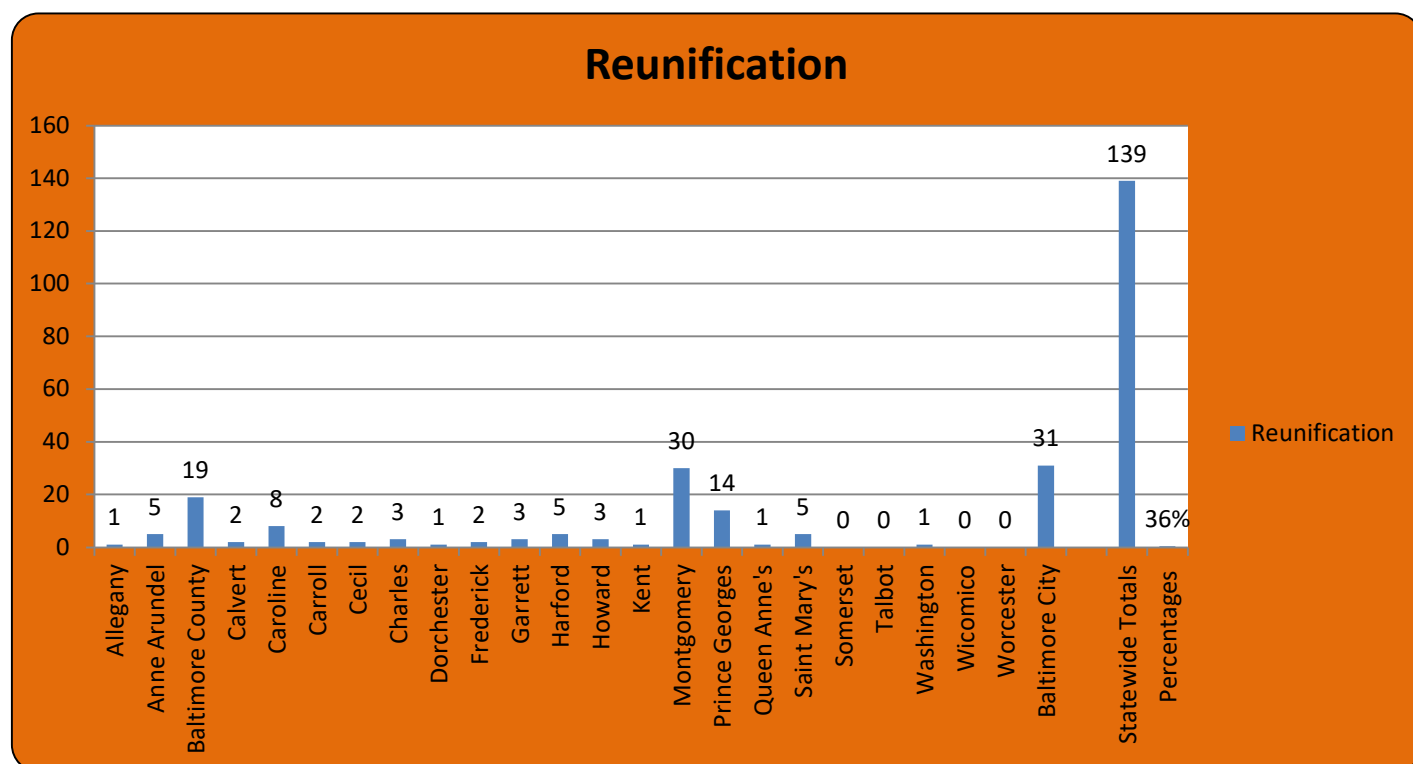
* Relative Placement is the combined total of Relative Placement for Adoption = 3 and Relative Placement for Custody/Guardianship = 7

CRBC conducted a total of 385 individual out-of-home case reviews (each case reviewed represents 1 child/youth) in 22 Jurisdictions on 102 boards that held reviews during fiscal year 2021.

** Due to the COVID-19 pandemic and the Governor of Maryland issuing a mandatory teleworking order effective March 13th, 2020, CRBC was unable to schedule case reviews in the 1st and 2nd quarters of fiscal 2021.

Reunification Case Reviews

The permanency plan of Reunification is generally the initial goal for every child that enters out-of-home placement and appropriate efforts should be made to ensure that the child/youth is receiving the services that are necessary to reunite with their family and have permanency. It is equally as important to make sure that reasonable efforts have been made with the identified parent or caregiver to promote reunification without undue delay.



Age Range	Statewide Totals	Reunification	Percentage
Age 1 thru 5	42	16	38%
Age 6 thru 10	30	15	50%
Age 11 thru 13	50	34	68%
Age 14 thru 16	80	55	69%
Age 17 thru 19	79	18	23%
Age 20	104	1	1%
Total	385	139	36%

Permanency

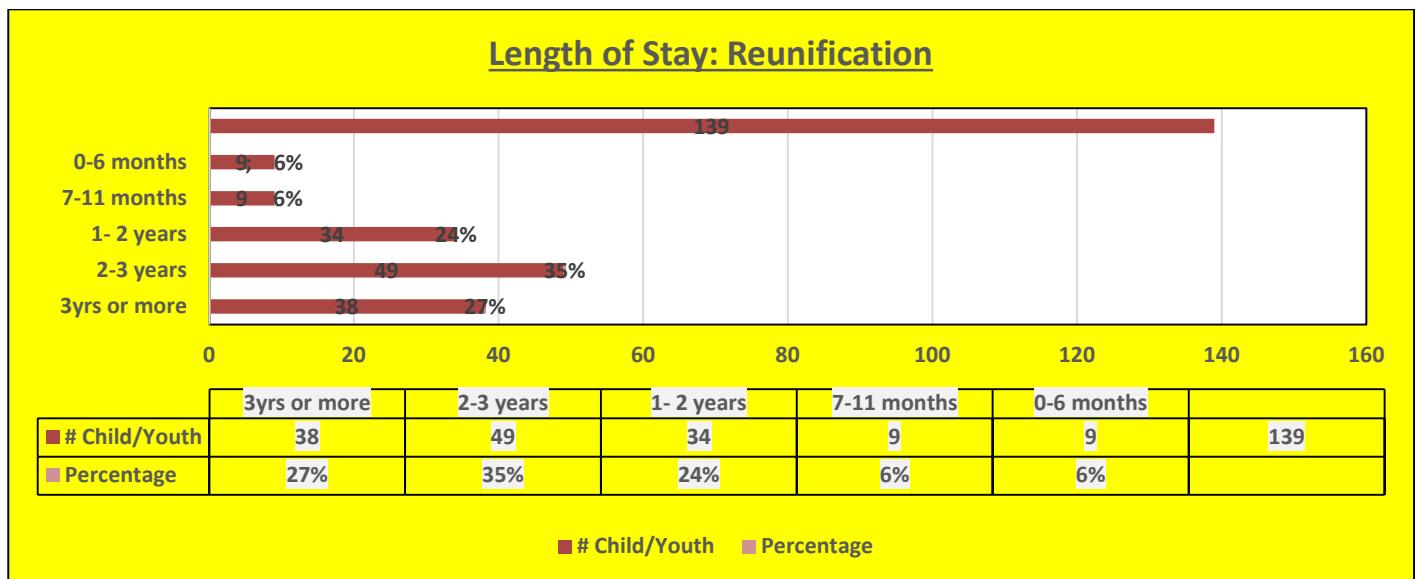
The local boards agreed with the permanency plan of reunification for 106 (76%) of the 139 cases reviewed.

The local juvenile courts identified concurrent permanency plans for 27 (20%) of 136 eligible cases reviewed.

The local departments were implementing the concurrent plans set by the local juvenile courts for 64 (47%) of the 136 eligible cases.

Length of Time a Child/Youth had a plan of Reunification

Of the 139 Reunification cases reviewed the local boards found that the length of time the child/youth had a plan of Reunification were as follows:



Case Planning/Service Agreements

Family Involvement Meetings (prior to entry): The local departments held family involvement meetings prior to entry for 112 (81%) of the 139 cases reviewed.

Service Agreements: The local departments had signed service agreements for 28 (20%) of the 138 eligible cases and 1 case was a Post-TPR child under the age of 14. Efforts to involve the families in the service agreement process were made for 60 (43%) of the 138 cases.

The local boards agreed that the service agreements were appropriate for 28 (20%) of the 138 signed cases.

Placement/Living Arrangement (LA)

Number of Cases	Placement/ Living Arrangement (LA)
20	Formal Kinship Care
2	Intermediate Foster Care
18	Regular Foster Care
8	Restricted (Relative) Foster Care
22	Treatment Foster Care
15	Treatment Foster Care (Private)
10	Residential Group Home
2	Therapeutic Group Home
3	Independent Living Residential Program
6	Residential Treatment Center
4	Own Dwelling
4	Psychiatric Respite
1	Correctional Institution (LA)
2	Inpatient Psychiatric Care (LA)
6	Runaway (LA)
1	Secure Detention Facility (LA)
14	Trial Home Visit (LA)
1	Unapproved Living Arrangement (LA)

Case Planning

In 73 (53%) of the 139 cases reviewed the children/youths were placed in their home jurisdiction in settings that were in close proximity to their communities which allowed for the continuity of services.

The local boards agreed with the department's placement plan for 114 (82%) of the 139 cases reviewed.

Placement Stability

The local boards found that in 53 (38%) of the 139 cases reviewed there were changes in placement within the 12 months prior to the review. 38 (72%) of the 53 cases had 1 placement change, 4 (8%) had 2 placement changes, 2 (4%) had 3 placement changes and 9 (17%) had 4 or more placement changes.

A family involvement meeting took place with the most recent placement changes for 32 (60%) of the 53 cases.

The following levels of care were found for the 53 most recent placement changes:

- 16 (30%) were in less restrictive placements
- 9 (17%) were in more restrictive placements
- 22 (42%) had the same level of care
- 6 (11%) child on runaway

The local boards found that the primary positive reasons for the 53 most recent placement changes were:

- Transition towards a permanency goal: 26 cases
- Placement with relatives: 2 cases
- Placement with siblings: 1 case

Provider specific issues for the most recent placement changes were:

- Allegation of provider abuse/neglect: 3 cases

Child/youth specific issues for the most recent placement changes were:

- Behavioral: 11 cases
- Threats of harm to self/others: 1 case
- Delinquent behavior: 1 case
- Runaway: 6 cases
- Hospitalization: 1 case

While child/youth was in the placement from which they were removed, were placement specific services adequate to support the provider:

a) Yes, for 37 cases

For the current placement, is there a match between the child/youth's needs and the provider's ability to meet those needs?

a) Yes, for 34 cases

Health/Mental Health

- Developmental/Special Needs: The local departments reported that 34 (24%) of the 139 children/youths reviewed had developmental or special needs.
- Current Physical: 92 (66%) children/youths had a current physical exam.
- Current Vision: 71 (51%) children/youths had a current vision exam.
- Current Dental: 56 (40%) children/youths had a current dental exam.

- Follow-up Health Concerns: The local departments ensured that appropriate follow-ups occurred on all health concerns noted by a physician for 31 (72%) of 43 eligible children/youths.
- Completed Medical Records: The local departments reported that 48 (35%) children/youths had completed medical records in their case files.
- Prescription Medication: 74 (53%) children/youths were taking prescription medication.
- Prescription Medication Monitored: Prescription medication was being monitored regularly for all 73 (99%) of the 74 children/youths.
- Psychotropic Medication: 57 (41%) children/youths were taking psychotropic medication.
- Psychotropic Medication Monitored: Psychotropic medication was being monitored at least quarterly for all 57 (100%) children/youths.
- Mental Health Issues: 97 (70%) children/youths had mental health issues.
- Mental Health Diagnosis: 93 (96%) of the 97 children/youths had a mental health diagnosis.
- Mental Health Issues Addressed: Yes, for 82 (85%) of the 97 children/youths.
- Mental Health Issues/Transitioning/Services: 1 youth with mental health issues who was transitioning out of care, had an identified plan to receive services in the adult mental health system.
- Substance Abuse: 19 (14%) children/youths had a substance abuse problem.
- Substance Abuse Addressed: Yes for 8 (42%) of the 19 children/youths.
- Behavioral Issues: 93 (67%) children/youths had behavioral issues.
- Behavioral Issues Addressed: Yes, for 82 (88%) of the 93 children/youths.

The local boards found that the health needs of 64 (46%) of the 139 children/youths had been met and 8 children/youths refused to comply with standard health exams.

Education

113 (81%) of the 139 children/youths reviewed were enrolled in school or another educational/vocational program. All 113 children/youths were in Pre-K thru 12th grade. 1 of the 26 children/youths not enrolled in school or another educational/vocational program had already graduated high school, 7 refused to attend school, 13 were under the age of 5 and 5 were unknown.

66 (58%) of the 113 children/youths enrolled in school or another educational/vocational program had a 504 or IEP plan. 55 (83%) of the 66 had a copy of the 504/IEP plan in the child/youth's record.

A current progress report/report card was available for review for 49 (43%) of the 113 children/youths enrolled in school or another educational/vocational program.

The local boards agreed that 107 (95%) of the 113 children/youths enrolled in school or another educational/vocational program were being appropriately prepared to meet educational goals.

Ready by 21

➤ Employment (age 14 and older – 72 cases)

4 (6%) of the 72 youths were employed or participating in paid or unpaid work experience. 2 youths were unable to work due to being medically fragile, 19 were unable to work due to mental health reasons, 1 was in a Juvenile Justice Facility and 1 was in a Correctional Facility.

The local boards agreed that 12 youths were being appropriately prepared to meet employment goals.

➤ Independent Living Services (age 14 and older – 72 cases)

The local boards agreed that 13 (18%) of the 72 youths were receiving appropriate services to prepare for independent living. 2 youths were unable to participate due to being medically fragile, 14 due to mental health reasons, 1 due to being in a Juvenile Justice Facility and 1 due to being in a Correctional Facility.

➤ Housing (Transitioning Youth – 1 case)

(Age 20 with a permanency plan of APPLA or planning to exit to independence within a year from the review)

Housing had been specified for the youth transitioning out of care.

The local boards agreed that the youth was being appropriately prepared to transition out of care.

Risk and Safety

The local boards agreed that safety and risk protocols were followed for 126 (91%) of the 139 children/youths.

CASA (Court Appointed Special Advocate)

The local boards found that for 49 (35%) of the 139 cases reviewed the children/youths had a court appointed special advocate.

Child Visits with Parents, Relatives and Siblings

Child Visits	With Parents	With Relatives
Yes	101	47
No	38	92

Frequency of Visits	With Parents	With Relatives
Daily	5	
Once a week	48	9
More than once a week	5	4
Once a month	8	1
More than once a month	23	13
Quarterly		1
Yes, but undocumented	12	19

Supervision of Visits	With Parents	With Relatives
Supervised	49	13
Unsupervised	52	34

Who Supervises Visits	With Parents	With Relatives
LDSS Agency Representative	35	8
Other Agency Representative	1	
Biological Family Member	1	3
Foster Parent	6	
Other	6	2

Where do Visits Occur?	With Parents	With Relatives
Parent/Relative Home	30	32
LDSS Visitation Center	5	
Public Area	18	7
Child's/Youth's Placement	32	5
Other	16	3

Overnight Stays	With Parents	With Relatives
Yes	24	15
No	77	32

The local boards found that 76 (55%) of the 139 children/youths had siblings in care. 37 (49%) of the 76 children/youths had visits with their siblings in care who did not reside with them.

Barriers/Issues

The local boards identified the following barriers to permanency/issues:

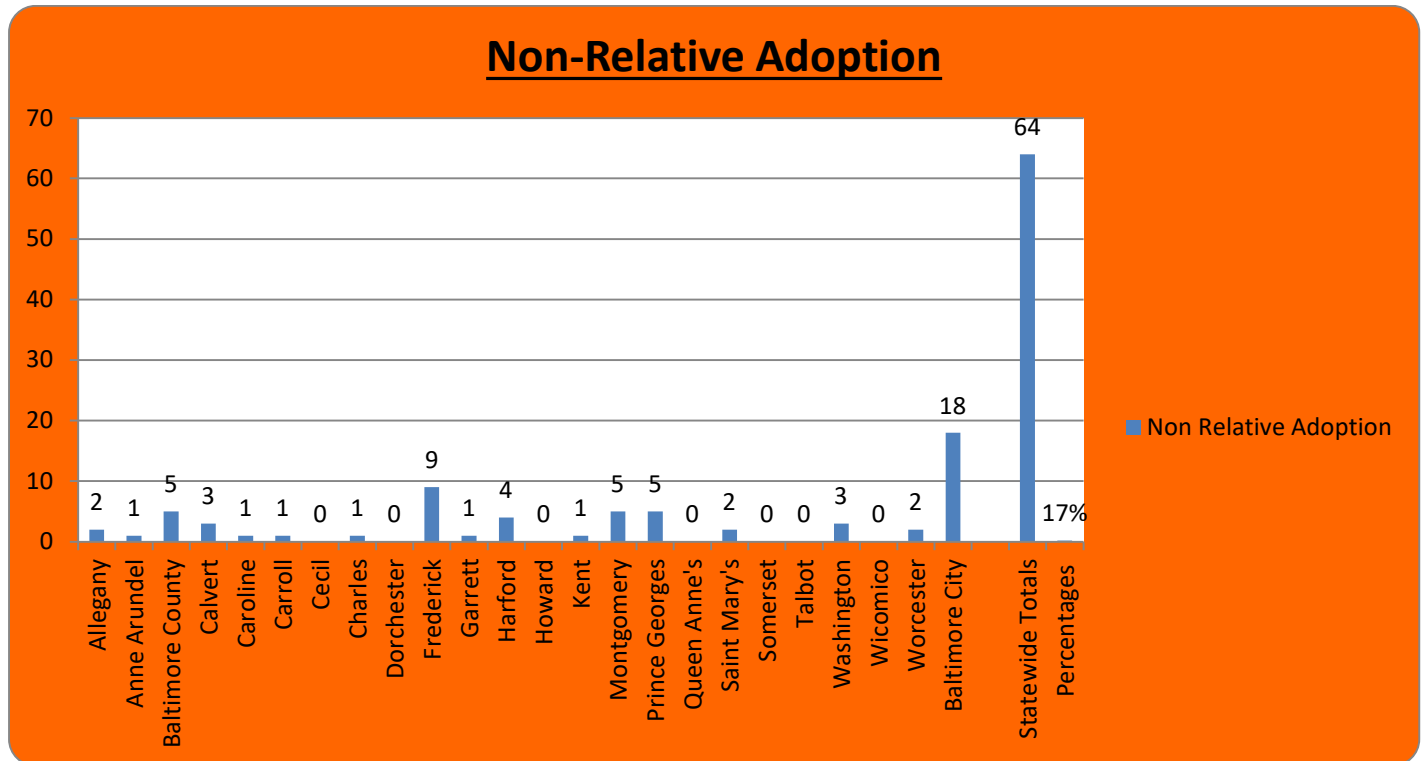
- No service agreement with parents.
- No service agreement with youth.
- Missing or lack of documentation.
- Annual physicals not current.
- Board does not agree with current permanency plan.
- Dentals not current.
- Vision not current.
- No current IEP.
- Other child/youth related barrier.
- Other agency related barrier.
- Other independence barrier.
- Other education barrier.
- Youth has not been assessed for mental health concerns.
- Poor coordination within DSS.
- Worker did not submit referral for needed resource/service.
- Lack of concurrent planning.
- Youth not enrolled in school.
- Child has behavior problems in the home.
- Youth not attending school or in GED program.
- Other physical health barrier.
- No follow up on medical referrals.
- Other placement barrier.
- Transitional housing has not been identified.
- Inadequate preparation for independence (general).
- Youth engages in risky behavior.
- No current Safe-C/G.
- Other court related barrier.
- Youth refuses mental health treatment including therapy.
- Youth non-compliant with medication.
- Youth placed outside of home jurisdiction.
- Youth not employed and transitioning out of care.

Summary

Based on the findings of the review the local boards determined that the local Department of Social Services made adequate progress towards a permanent placement (COMAR – 07.01.06.05 (F)) for 105 (76%) of the 139 children reviewed

Non-Relative Adoption Case Reviews

When parental rights are terminated (TPR) Adoption becomes the preferred permanency plan. There are a number of factors to consider when a plan of adoption has been established, ranging from the termination of parental rights to what post adoption services are made available to the adoptive families. Reasonable efforts should be made to identify adoptive resources and provide appropriate services identified to remove barriers to adoption and achieve permanency for the child/youth in a timely manner.



Age Range	Statewide Totals	Adoption	Percentage
Age 1 thru 5	42	23	55%
Age 6 thru 10	30	13	43%
Age 11 thru 13	50	9	18%
Age 14 thru 16	80	17	21%
Age 17 thru 19	79	2	3%
Age 20	104	0	N/A
Total	385	64	17%

Permanency

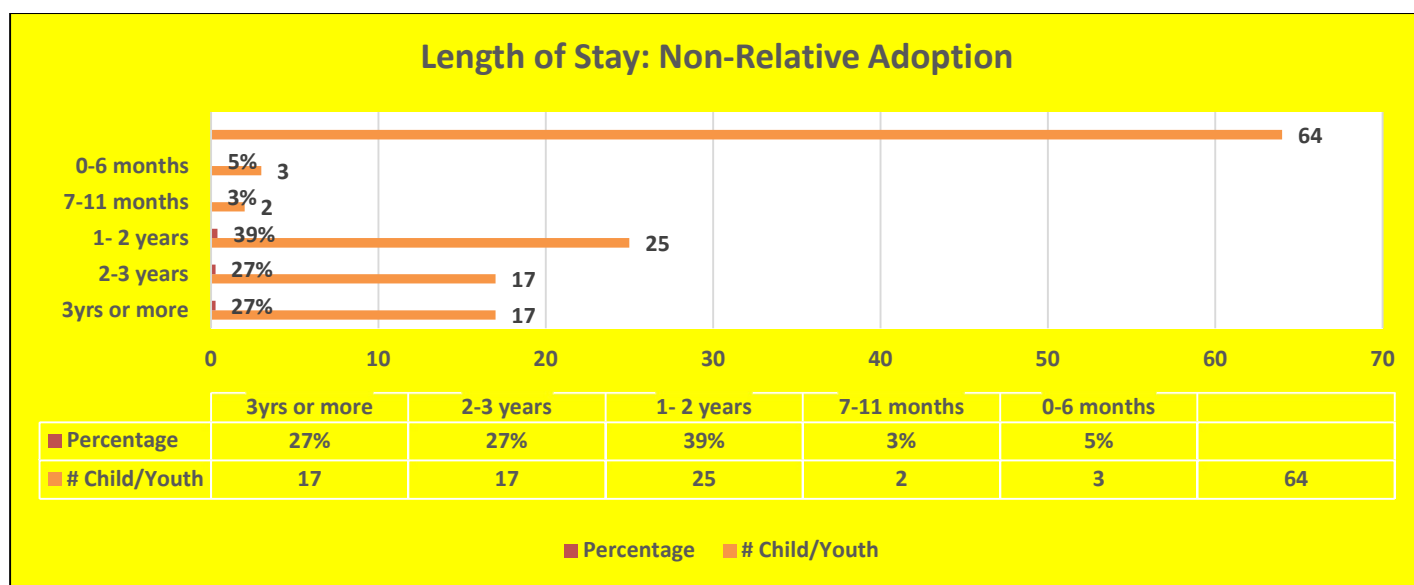
The local boards agreed with the permanency plan of Non-Relative Adoption for 61 (95%) of the 64 cases reviewed.

The local juvenile courts identified concurrent permanency plans for 2 (11%) of the 19 eligible cases reviewed.

The local departments were implementing the concurrent plans set by the local juvenile courts for the 2 cases.

Length of time Child/Youth had a plan of Adoption

Of the 64 Non-Relative Adoption cases reviewed the local boards found that the length of time the child/youth had a plan of Adoption were as follows:



Case Planning/Service Agreements

Family Involvement Meetings (prior to entry): The local departments held family involvement meetings prior to entry for 50 (78%) of the 64 cases reviewed.

Service Agreements: The local departments had signed service agreements for 3 (14%) of the 21 eligible cases and 43 cases were Post-TPR children under the age of 14. Efforts to involve the families in the service agreement process were made for 4 (19%) of the 21 cases.

The local boards agreed that the service agreements were appropriate for all 3 signed cases.

Placement/Living Arrangement (LA)

Number of Cases	Placement/Living Arrangement (LA)
2	Formal Kinship Care
40	Pre-Finalized Adoptive Home
4	Regular Foster Care
4	Treatment Foster Care
3	Treatment Foster Care (Private)
3	Residential Group Home
4	Therapeutic Group Home
3	Residential Treatment Center
1	Unapproved Living Arrangement (LA)

In 33 (52%) of the 64 cases reviewed the children/youths were placed in their home jurisdiction in settings that were in close proximity to their communities which allowed for the continuity of services.

The local boards agreed with the department's placement plan for 62 (97%) of the 64 cases reviewed.

Placement Stability

The local boards found that in 12 (19%) of the 64 cases reviewed there was a change in placement within the 12 months prior to the review. 10 (83%) of the 12 cases had 1 placement change, 1 (8%) had 2 placement changes and 1 (8%) had 4 or more placement changes.

A family involvement meeting took place with the most recent placement changes for 10 (83%) of the 12 cases.

The following levels of care were found for the 12 most recent placement changes:

- 1 (8%) were in less restrictive placements
- 1 (8%) were in more restrictive placements
- 10 (83%) had the same level of care

The local boards found that the primary positive reasons for the 12 most recent placement changes were:

- Transition towards a permanency goal: 7 cases
- Placement with siblings: 1 case

Provider specific issues for the most recent placement changes were:

- Provider request: 1 case

- Allegation of provider abuse/neglect: 1 case

Child/youth specific issues for the most recent placement changes were:

- Behavioral: 3 cases

While child/youth was in the placement from which they were removed, were placement specific services adequate to support the provider:

b) Yes, for 8 cases

For the current placement, is there a match between the child/youth's needs and the provider's ability to meet those needs?

b) Yes, for 9 cases

Health/Mental Health

- Developmental/Special Needs: The local departments reported that 21 (33%) of the 64 children/youths reviewed had developmental or special needs.
- Current Physical: 53 (83%) children/youths had a current physical exam.
- Current Vision: 51 (80%) children/youths had a current vision exam.
- Current Dental: 46 (72%) children/youths had a current dental exam.
- Follow-up Health Concerns: The local departments ensured that appropriate follow-ups occurred on all health concerns noted by a physician for 24 (89%) of 27 eligible children/youths.
- Completed Medical Records: The local departments reported that 30 (47%) children/youths had completed medical records in their case files.
- Prescription Medication: 26 (41%) children/youths were taking prescription medication.
- Prescription Medication Monitored: Prescription medication was being monitored regularly for the 26 children/youths.
- Psychotropic Medication: 19 (30%) children/youths were taking psychotropic medication.
- Psychotropic Medication Monitored: Psychotropic medication was being monitored at least quarterly for the 19 children/youths.
- Mental Health Issues: 34 (53%) children/youths had mental health issues.
- Mental Health Diagnosis: 34 (53%) children/youths had mental health diagnosis.

- Mental Health Issues Addressed: Yes, for 33 (97%) of the 34 children/youths.
- Mental Health Issues/Transitioning/Services: Not applicable. None of the youths with mental health issues were transitioning out of care.
- Substance Abuse: 1 (2%) child/youth had a substance abuse problem.
- Substance Abuse Addressed: No, for the child/youth.
- Behavioral Issues: 33 (52%) children/youths had behavioral issues.
- Behavioral Issues Addressed: Yes, for 31 (94%) of the 33 children/youths.
- The local boards found that the health needs of 46 (72%) of the 64 children/youths had been met.

Education

46 (72%) of the 64 children/youths reviewed were enrolled in school or another educational/vocational program. All 46 children/youths were in Pre-K thru 12th grade. All 18 children/youths not enrolled in school or another educational/vocational program were under the age of 5.

24 (52%) of the 46 children/youths enrolled in school or another educational/vocational program had a 504 or IEP plan. 20 (83%) of the 24 cases had a copy of the 504/IEP plan in the child/youth's record.

A current progress report/report card was available for review for 21 (46%) of the 46 children/youths enrolled in school or another educational/vocational program.

The local boards agreed that 44 (96%) of the 46 children/youths enrolled in school or another educational/vocational program were being appropriately prepared to meet educational goals.

Ready by 21

➤ Employment (age 14 and older – 18 cases)

1 (6%) of the 18 youths was employed or participating in paid or unpaid work experience. 4 youths were unable to participate due to mental health reasons.

The local boards agreed that 1 youth was being appropriately prepared to meet employment goals.

➤ Independent Living Services (age 14 and older – 18 cases)

The local boards agreed that 8 (44%) of the 18 youths were receiving appropriate services to prepare for independent living.

4 youths were unable to receive appropriate services to prepare for independent living due to mental health reasons.

➤ Housing (Transitioning Youth – None)

(Age 20 with a permanency plan of APPLA or planning to exit to independence within a year from the review)

Not applicable.

Child's Consent to Adoption

The age of consent for adoption in the State of Maryland is ten. Children 10 and older must consent to be adopted. The local boards found that 30 (47%) of the 64 children/youths consented to adoption and 25 (39%) children/youths were under the age of consent.

Consent to Adoption for Cases Reviewed with Adoption Plans

Child's Consent to Adoption	Cases
Yes	16
Yes, with conditions	0
Child did not want to be Adopted	4
N/A under age of consent	25
No, Medically Fragile, unable to consent	3
No, Mental Health Reasons, unable to consent	1
Unknown	5

Pre-Adoptive Placement, Recruitment, Services and Resources

Pre-Adoptive Placements (40 cases)

40 (63%) of the 64 children/youths with a plan of adoption were placed in pre-adoptive homes. The family structure was comprised of a married couple for 32 (80%) of the 40 cases and a single female for 8 (20%) cases. The relationship to the pre-adoptive children/youths was non-relative foster parents for 38 (95%) cases and fictive kin foster parents for 2 (5%) cases.

Lengths of time in the pre-adoptive placements were as follows:

- 2 case(s) from 1 to 3 months
- 1 case(s) from 4 to 6 months
- 2 case(s) from 7 to 9 months
- 2 case(s) from 10 to 12 months
- 4 case(s) from 16 to 20 months
- 29 case(s) 21 months or more

An adoptive home study was completed and approved for 25 (63%) of the 40 cases.

The local boards agreed that appropriate services and supports were in place for the pre-adoptive families to meet the identified needs of the children/youths for all 40 (100%) cases.

The local boards found that the pre-adoptive placements were appropriate for all 40 (100%) cases.

Adoptive Recruitment (24 cases)

The local boards found that the local department had documented efforts to find an adoptive resource for 12 (50%) of the 24 children/youths not placed in a pre-adoptive home. The adoptive recruitment resources were Adopt Us Kids, Wednesdays Child and Wendy's Wonderful Kids.

The local boards agreed that the adoptive recruitment efforts were appropriate for 11 (92%) of the 12 children/youths.

Post-Adoptive Services and Resources

Post-adoptive services were needed for 48 (75%) of the 64 children/youths. The services that were needed were Medical for 31 cases, Mental Health services for 24 cases, Educational services for 16 cases, Respite Services for 4 cases and DDA services for 7 cases.

Post-adoptive subsidies were needed for 102 (71%) of the 143 children/youths.

The local boards agreed that the post-adoptive services and resources were appropriate for 47 (98%) of the 48 children/youths.

Risk and Safety

The local boards agreed that safety and risk protocols were followed for 60 (94%) of the 64 children/youths.

CASA (Court Appointed Special Advocate)

The local boards found that for 21 (33%) of the 64 cases reviewed the children/youths had a court appointed special advocate.

Child Visits with Parents, Relatives and Siblings

Child Visits	With Parents	With Relatives
Yes	10	7
No	54	57

Frequency of Visits	With Parents	With Relatives
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Daily		
Once a week		1
More than once a week	1	
Once a month	7	3
More than once a month		2
Quarterly	1	
Yes, but undocumented	1	1

Supervision of Visits	With Parents	With Relatives
Supervised	10	1
Unsupervised		6

Who Supervises Visits	With Parents	With Relatives
LDSS Agency Representative	4	1
Other Agency Representative		
Biological Family Member		
Foster Parent	3	
Other	3	

Where do Visits Occur?	With Parents	With Relatives
Parent/Relative Home		3
LDSS Visitation Center	1	
Public Area	3	2
Child's/Youth's Placement	3	
Other	3	2

Overnight Stays	With Parents	With Relatives
Yes		4
No	10	3

The local boards found that 35 (55%) of the 64 children/youths had siblings in care. 12 (34%) of the 35 children/youths had visits with their siblings in care who did not reside with them.

Barriers/Issues

The local boards identified the following barriers to permanency/issues:

- No service agreement with youth.
- Missing or lack of documentation.
- Child has behavior problems in the home.
- TPR not granted.

- Child in pre-adoptive home but adoption not finalized.
- Disrupted finalized adoption.
- Annual physicals not current.
- Dentals not current.
- Vision not current.
- Board does not agree with current permanency plan.
- Other independence barrier.
- Pre-Adoptive resources not identified.
- Other education barrier.
- Lack of concurrent planning.
- Youth placed outside of home jurisdiction.
- No current Safe-C/G.
- Postponement or continuation of hearings.
- Appeal by birth parents.

Summary

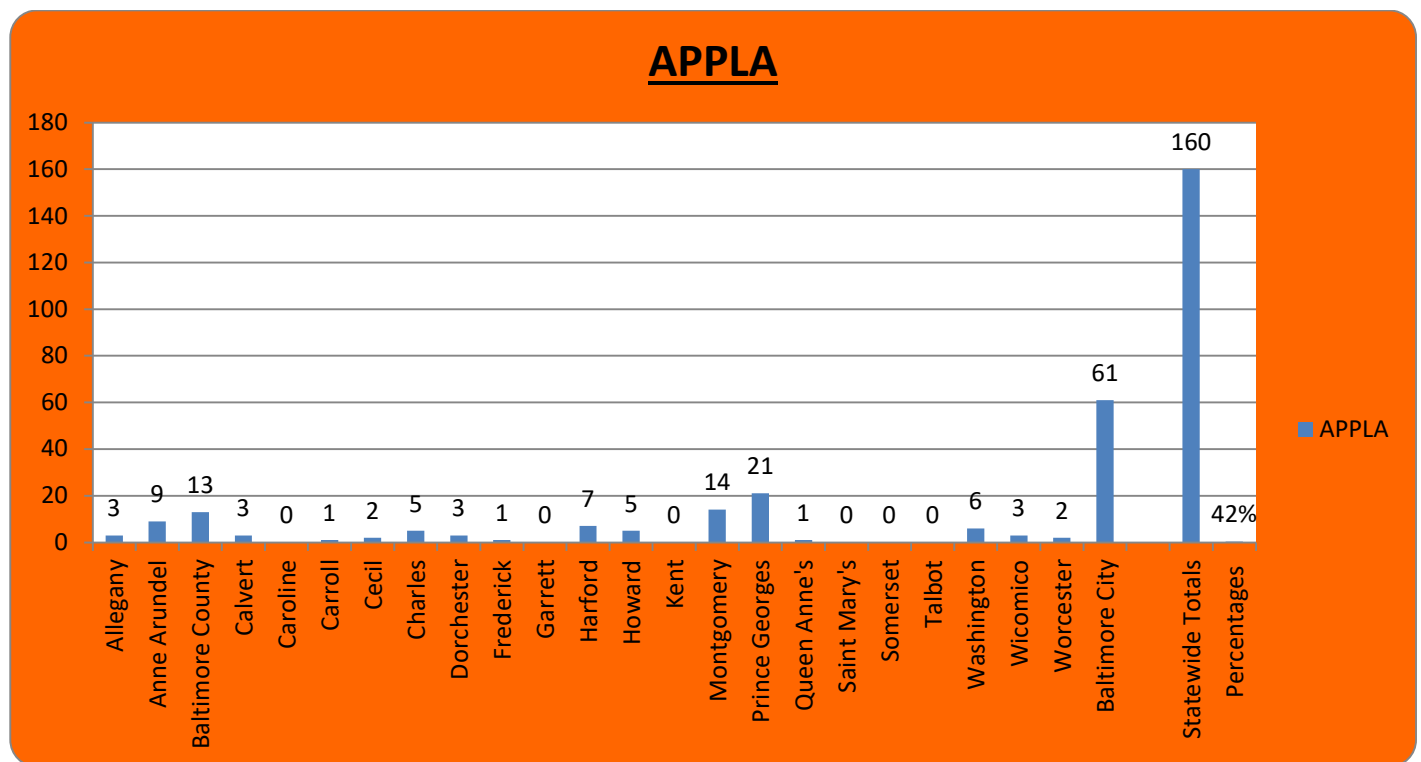
Based on the findings of the review the local boards determined that the local Department of Social Services made adequate progress towards a permanent placement (COMAR – 07.01.06.05 (F)) for 60 (94%) of the 64 children reviewed.

APPLA Reviews

(Another Planned Permanent Living Arrangement)

APPLA is the least desired permanency plan. All efforts should be made to rule out all other permanency plans including reunification with birth family, relative placement for custody and guardianship or adoption, adoption to a non-relative and guardianship to a non-relative before a child/youth's permanency plan is designated as APPLA.

Out of the total number of 385 cases reviewed, 160 (42%) of the cases had a plan of APPLA. Baltimore City had the most 61 (38%), Baltimore County 13 (8%), Montgomery County 14 (9%), Prince George's County 21 (13%), Anne Arundel 9 (6%) and Harford 7 (4%). All other counties had three percent or less. Many of the cases reviewed were cases of older youth, between 17 and 20 years of age who are expected to remain in care until they age out on their 21st birthday.



Age Range	Statewide Totals	APPLA	Percentage
Age 1 thru 5	42	0	N/A
Age 6 thru 10	30	0	N/A
Age 11 thru 13	50	0	N/A
Age 14 thru 16	80	2	3%

Age 17 thru 19	79	55	70%
Age 20	104	103	99%
Total	385	160	42%

Permanency

The local boards agreed with the permanency plan of APPLA for 159 (99%) of the 160 cases reviewed.

Category of APPLA plan

The local boards found the following categories for the APPLA plans:

- Emancipation/Independence: 138 (86%) cases
- Transition to an Adult Supportive Living Arrangement: 22 (14%) cases

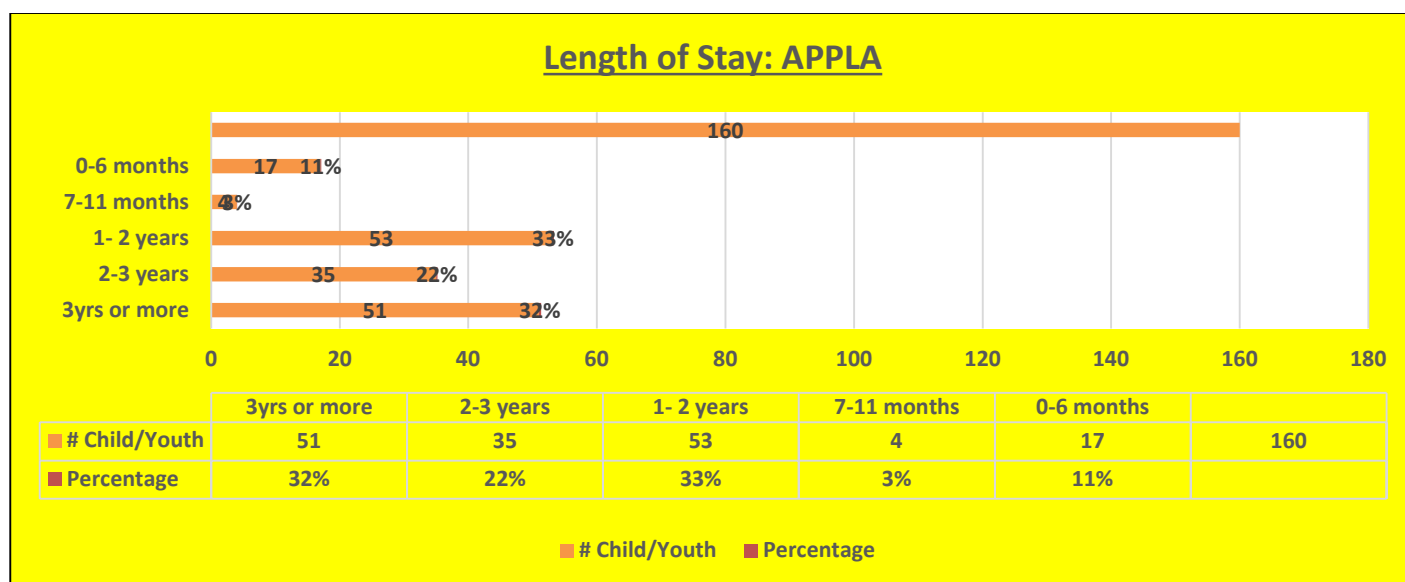
Permanent Connections (160 cases)

A permanent connection is an identified person that a youth can rely on for assistance with support, advice and guidance as they deal with the day-to-day life circumstances that adulthood can bring about on a regular basis.

The local boards found that for 149 (93%) of the 160 cases reviewed, a permanent connection had been identified for the children/youths by the local departments and that the identified permanent connections were appropriate for 146 (91%) cases.

Length of time Child/Youth had a plan of APPLA

Of the 160 APPLA cases reviewed the local boards found that the length of time the child/youth had a plan of APPLA were as follows:



Case Planning/Service Agreements

Family Involvement Meetings (prior to entry): The local boards found that the local departments held family involvement meetings prior to entry for 103 (64%) of the 160 cases reviewed.

Service Agreements: The local departments had signed service agreements for 63 (39%) of the 160 eligible cases. Efforts to involve the families in the service agreement process were made for 83 (52%) of the 160 eligible cases.

The local boards found that the service agreements were appropriate for 61 (97%) of the 63 signed cases.

Placement/Living Arrangement (LA)

Number of Cases	Placement/ Living Arrangement (LA)
3	Formal Kinship Care
5	Regular Foster Care
3	Restricted (Relative) Foster Care
15	Treatment Foster Care
15	Treatment Foster Care (Private)
8	Residential Group Home
6	Teen Mother Program
21	Therapeutic Group Home
12	Independent Living Residential Program
4	Residential Treatment Center
3	Relative

7	Non-Relative
8	Own Dwelling
1	Diagnostic Center
1	Psychiatric Respite
	Living Arrangement (LA)
2	College (LA)*
2	Correctional Institution (LA)
3	Inpatient Psychiatric Care (LA)*
7	Runaway (LA)
3	Secure Detention Facility (LA)
14	Unapproved Living Arrangement (LA)
1	Other

(*These cases have both a living arrangement and a placement) Living arrangements are usually temporary and not paid placements.

In 90 (56%) of the 160 cases reviewed the children/youths were placed in their home jurisdiction in settings that were in close proximity to their communities which allowed for the continuity of services.

The local boards agreed with the department's placement plan for 131 (82%) of the 160 cases reviewed.

Placement Stability

The local boards found that for 67 (42%) cases reviewed there was a change in the placement in the last 12 months prior to being reviewed. 33 (49%) of the 67 cases reviewed had 1 placement change, 18 (27%) had 2 placement changes, 8 (12%) had 3 placement changes and 8 (12%) had 4 or more placement changes.

A family involvement meeting took place with the most recent placement changes for 36 (54%) of the 67 cases.

- 30 (45%) were in less restrictive placements
- 8 (12%) were in more restrictive placements
- 20 (30%) had the same level of care
- 6 (9%) youth on runaway
- 3 (4%) information unknown

The local boards found that the primary positive reasons for the 67 most recent placement changes were:

- Transition towards a permanency goal: 36 cases

Child/youth specific issues for the most recent placement changes were:

- Behavioral: 13 cases
- Threats of harm to self or others: 1 case
- Runaway: 6 cases

While child/youth was in the placement from which they were removed, were placement specific services adequate to support the provider:

c) Yes, for 44 cases

For the current placement, is there a match between the child/youth's needs and the provider's ability to meet those needs?

c) Yes, for 44 cases

Health/Mental Health

- Developmental/Special Needs: The local departments reported that 30 (19%) of the 160 children/youths reviewed had developmental or special needs.
- Current Physical: 63 (39%) children/youths had a current physical exam.
- Current Vision: 45 (28%) children/youths had a current vision exam.
- Current Dental: 48 (30%) children/youths had a current dental exam.
- Follow-up Health Concerns: The local departments ensured that appropriate follow-ups occurred on all health concerns noted by a physician for 23 (62%) of 37 eligible children/youths.
- Completed Medical Records: The local departments reported that 28 (18%) of the children/youths had completed medical records in their case files.
- Prescription Medication: 59 (37%) children/youths were taking prescription medication.
- Prescription Medication Monitored: Prescription medication was being monitored regularly for 58 (98%) of the 59 children/youths.
- Psychotropic Medication: 48 (30%) children/youths were taking psychotropic medication.
- Psychotropic Medication Monitored: Psychotropic medication was being monitored at least quarterly for the 48 (100%) children/youths.
- Mental Health Issues: 127 (79%) children/youths had mental health issues.
- Mental Health Diagnosis: 121 (76%) children/youths had mental health diagnosis.
- Mental Health Issues Addressed: Yes, for 66 (52%) of the 127 children/youths.

- Mental Health Issues/Transitioning/Services: 16 (13%) of the 127 youths with mental health issues who were transitioning out of care, had an identified plan to receive services in the adult mental health system and 23 (18%) did not have an identified plan.
- Substance Abuse: 42 (26%) children/youths had a substance abuse problem.
- Substance Abuse Addressed: Yes for 8 (19%) of the 42 children/youths.
- Behavioral Issues: 86 (54%) children/youths had behavioral issues.
- Behavioral Issues Addressed: Yes, for 44 (51%) of the 86 children/youths.
- The local boards found that the health needs of 48 (30%) of the 160 children/youths had been met and 29 children/youths refused to comply with standard health exams.

Education

49 (31%) of the 160 children/youths reviewed were enrolled in school or another educational/vocational program. 34 (69%) of the 49 were in Pre-K through 12th grade, 4 (8%) were enrolled in a GED program, 10 (20%) were in college and 1 (2%) was in trade school. 74 (67%) of the 111 children/youths not enrolled in school or another educational/vocational program had already graduated high school and 37 (33%) refused to attend school.

24 (71%) of the 34 children/youths enrolled in school or another educational/vocational program had a 504 or IEP plan. 18 (75%) of the 24 had a copy of the 504/IEP plan in the child/youth's record.

A current progress report/report card was available for review for 14 (29%) of the 49 children/youths enrolled in school or another educational/vocational program.

The local boards agreed that 92 (77%) of 119 children/youths enrolled in school or another educational/vocational program were being appropriately prepared to meet educational goals.

Ready by 21

➤ Employment (age 14 and older – 156 cases)

79 (51%) of the 156 youths were employed or participating in paid or unpaid work experience. 2 youths were unable to participate due to being medically fragile, 20 were unable to participate due to mental health reasons and 3 were in a Correctional Facility.

The local boards agreed that 91 youths were being appropriately prepared to meet employment goals.

➤ Independent Living Services (age 14 and older – 156 cases)

The local boards agreed that 86 (55%) of the 156 youths were receiving appropriate services to prepare for independent living.

2 youths were unable to participate in independent living services due to being medically fragile, 14 due to mental health reasons and 3 due to being in a Correctional Facility.

➤ Housing (Transitioning Youth – 103 cases)

(Age 20 with a permanency plan of APPLA or planning to exit to independence within a year from the review)

Housing had been specified for 54 (52%) of the 103 youths transitioning out of care. Alternative housing options were also provided for 61 youths.

The local boards agreed that 60 youths were being appropriately prepared to transition out of care.

Risk and Safety

The local boards agreed that safety and risk protocols were followed for 136 (85%) of the 160 children/youths.

CASA (Court Appointed Special Advocate)

The local boards found that in 41 (26%) of the 160 cases reviewed the children/youths had a court appointed special advocate.

Child Visits with Parents, Relatives and Siblings

Child Visits	With Parents	With Relatives
Yes	64	59
No	96	101

Frequency of Visits	With Parents	With Relatives
Daily		1
Once a week	9	7
More than once a week	4	4
Once a month	8	2
More than once a month	18	20
Quarterly	1	
Yes, but undocumented	24	25

Supervision of Visits	With Parents	With Relatives
Supervised	4	1
Unsupervised	60	58

Who Supervises Visits	With Parents	With Relatives
LDSS Agency Representative	2	1
Other Agency Representative		
Biological Family Member		
Foster Parent		
Other	2	

Where do Visits Occur?	With Parents	With Relatives
Parent/Relative Home	30	31
LDSS Visitation Center	5	7
Public Area	16	13
Child's/Youth's Placement	9	6
Other	4	2

Overnight Stays	With Parents	With Relatives
Yes	21	20
No	43	39

The local boards found that 27 (17%) of the 160 children/youths had siblings in care. 12 (44%) of the 27 children/youths had visits with siblings in care who did not reside with them.

Barriers/Issues

The local boards identified the following barriers to permanency/issues:

- No service agreement with parents.
- No service agreement with youth.
- Youth placed outside of home jurisdiction.
- Missing or lack of documentation.
- Child has behavior problems in the home.
- Issues related to substance abuse.
- Not following up on referrals.
- Youth not enrolled in school.
- Youth not attending school or in GED program.
- Youth not receiving adequate services.
- No current IEP.
- Board does not agree with current permanency plan.
- Annual physicals not current.
- Dentals not current.

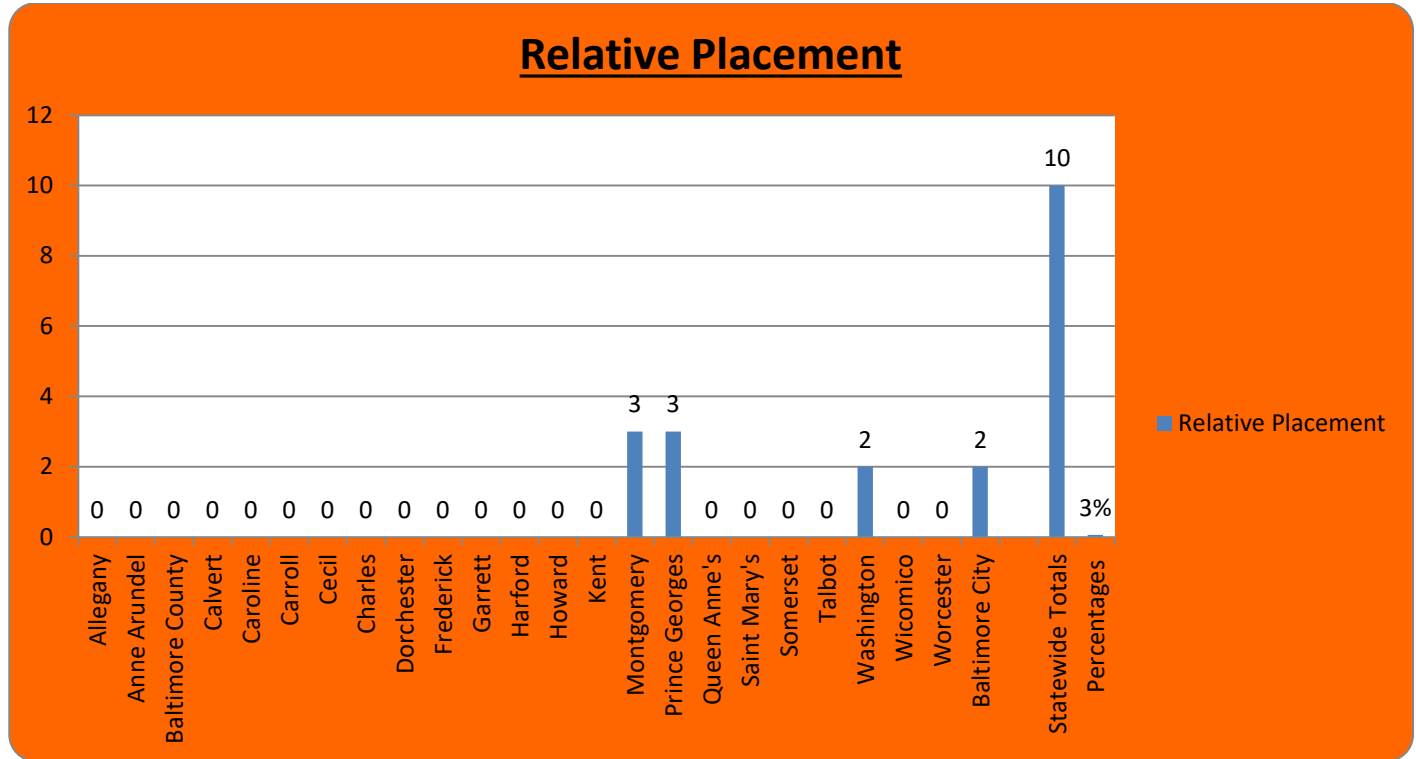
- Vision not current.
- No follow up on medical referrals.
- Transitional housing has not been identified.
- Inadequate preparation for independence (general).
- Youth not employed and transitioning out of care.
- Other education barrier.
- Other independence barrier.
- Other placement barrier.
- Youth refuses mental health treatment including therapy.
- Youth non-compliant with medication.
- No current Safe C/G.
- Youth engages in risky behavior.
- Other mental health barrier.
- Other legal barrier.
- Other child/youth related barrier.

Summary

Based on the findings of the review the local boards determined that the local Department of Social Services made adequate progress towards a permanent placement (COMAR – 07.01.06.05 (F)) for 119 (74%) of the 160 children reviewed.

Relative Placement Case Reviews

It is the responsibility of the local departments to seek out opportunities for placement with a blood relative or explore other permanency resources including fictive kin when reunification is not possible.



Category of Relative Placement

- Relative Placement for Adoption: 3 cases
- Relative Placement for Custody/Guardianship: 7 cases

Age Range	Totals	Relative Placement	Percentage
Age 1 thru 5	42	3	7%
Age 6 thru 10	30	1	3%
Age 11 thru 13	50	5	10%
Age 14 thru 16	80	1	1%
Age 17 thru 19	79	0	N/A
Age 20	104	0	N/A
Total	385	10	3%

Permanency

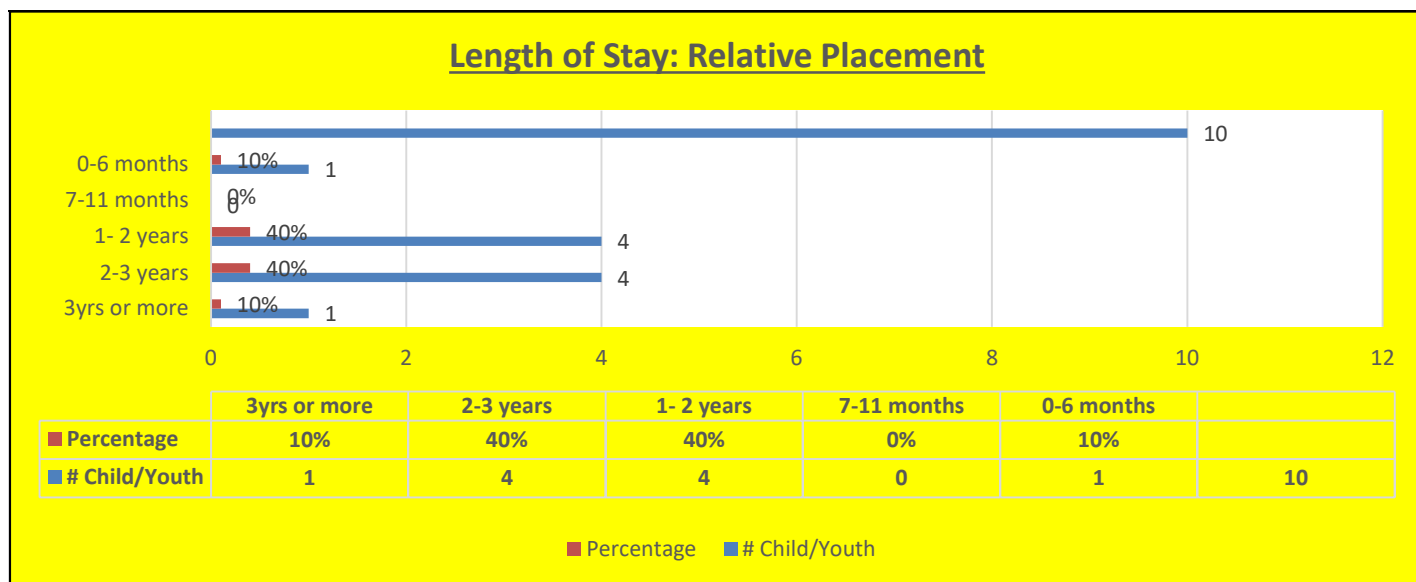
The local boards agreed with the permanency plan of relative placement for all 10 (100%) cases reviewed.

The local juvenile courts identified concurrent permanency plans for 2 (20%) of the 10 cases reviewed.

The local departments were implementing the concurrent plans set by the local juvenile courts for both cases.

Length of time child/youth had a plan of Relative Placement

Of the 10 cases reviewed the local boards found that the length of time the child/youth had a plan of Relative Placement for Custody/Guardianship or Adoption were as follows:



Case Planning/Service Agreements

Family Involvement Meetings (prior to entry): The local boards found that the local departments held family involvement meetings prior to entry for 9 (90%) of the 10 cases reviewed.

Service Agreements: The local departments did not have signed service agreements for any of the 10 cases. Efforts to involve the families in the service agreement process were made for 3 (30%) of the 10 eligible cases reviewed.

Placement

Number of Cases	Placement/Living Arrangement (LA)
1	Formal Kinship Care
1	Intermediate Foster Care
2	Regular Foster Care
2	Restricted (Relative) Foster Care
1	Treatment Foster Care
1	Treatment Foster Care (Private)
1	Residential Group Home
1	Other (LA)

The local boards found that in 7 (70%) of the 10 cases reviewed the children/youths were placed in settings that were in close proximity to their communities which allowed for the continuity of services.

The local boards agreed with the placement plan for all 10 (100%) cases reviewed.

Placement Stability

The Local boards found that for 5 (50%) of the 10 cases reviewed there was a change in placement within the 12 months prior to the review. 3 (60%) of the 5 cases had 1 placement change, 1 (20%) had 2 placement changes and 1 (20%) had 3 placement changes.

A family involvement meeting took place with the most recent placement changes for 2 (40%) of the 5 cases.

The following levels of care were found for the 5 most recent placement changes:

- 2 (40%) were in less restrictive placements
- 1 (20%) were in more restrictive placements
- 2 (40%) had the same level of care

The local boards found that the primary positive reasons for the 5 most recent placement changes were:

- Transition towards a permanency goal: 1 case
- Placement with relatives: 3 cases

Provider specific issues for the most recent placement changes were:

- Provider request: 1 case

Child/youth specific issues for the most recent placement changes were:

- Behavioral: 1 case
- Delinquent behavior: 1 case

While child/youth was in the placement from which they were removed, were placement specific services adequate to support the provider:

- Yes, for all 5 cases

For the current placement, is there a match between the child/youth's needs and the provider's ability to meet those needs?

- Yes, for all 5 cases

Health/Mental Health

- Developmental/Special Needs: The local departments reported that none of the 10 children/youths reviewed had developmental or special needs.
- Current Physical: 5 (50%) children/youths had a current physical exam.
- Current Vision: 2 (20%) children/youths had a current vision exam.
- Current Dental: 2 (20%) children/youths had a current dental exam.
- Follow-up Health Concerns: The local departments ensured that appropriate follow-ups occurred on all health concerns noted by a physician for 2 (67%) of the 3 eligible children/youths.
- Completed Medical Records: The local departments reported that 2 (20%) of the children/youths had completed medical records in their case files.
- Prescription Medication: 3 (30%) children/youths were taking prescription medication.
- Prescription Medication Monitored: Prescription medication was being monitored regularly for all 3 children/youths.
- Psychotropic Medication: 2 (20%) children/youths were taking psychotropic medication.
- Psychotropic Medication Monitored: Psychotropic medication was being monitored at least quarterly for both children/youths.
- Mental Health Issues: 4 (40%) children/youths had mental health issues.
- Mental Health Diagnosis: 4 (40%) children/youths had a mental health diagnosis.

- Mental Health Issues Addressed: Yes, for all 4 (100%) children/youths.
- Mental Health Issues/Transitioning/Services: Not applicable. None of the children/youths with mental health issues were transitioning out of care.
- Substance Abuse: 1 (10%) children/youths had a substance abuse problem.
- Substance Abuse Addressed: Yes, for the child/youth.
- Behavioral Issues: 3 (30%) children/youths had behavioral issues.
- Behavioral Issues Addressed: Yes, for all 3 children/youths.
- The local boards found that the health needs of 2 (20%) of the 10 children/youths had been met.

Education

8 (80%) of the 10 children/youths reviewed were enrolled in school or another educational/vocational program. All 8 were in Pre-K through 12th grade. 2 of the 10 children/youths not enrolled in school or another educational/vocational program were under the age of 5.

2 (25%) of the 8 children/youths enrolled in school or another educational/vocational program had a 504 or IEP plan. Both children/youths had a copy of the 504/IEP plan in the child/youth's record.

A current progress report/report card was available for review for 3 (38%) of the 8 children/youths enrolled in school or another educational/vocational program.

The local boards agreed that 6 (75%) of the 8 children/youths enrolled in school or another educational/vocational program were being appropriately prepared to meet educational goals.

Ready by 21

➤ Employment (age 14 and older – 1 case)

The youth was not employed or participating in paid or unpaid work experience.

The local boards agreed that the youth was not being appropriately prepared to meet employment goals

➤ Independent Living Services (age 14 and older – 1 case)

The local boards agreed that 1 youth was receiving appropriate services to prepare for independent living.

➤ Housing (Transitioning Youth – None)

Not applicable.

Risk and Safety

The local boards agreed that safety and risk protocols were followed for all 10 children/youths.

CASA (Court Appointed Special Advocate)

The local boards found that for 1 of the 10 cases reviewed the child/youth had a court appointed special advocate.

Child Visits with Parents, Relatives and Siblings

Child Visits	With Parents	With Relatives
Yes	3	2
No	7	8

Frequency of Visits	With Parents	With Relatives
Daily		
Once a week		
More than once a week		
Once a month		
More than once a month	1	
Quarterly		
Yes, but undocumented	2	2

Supervision of Visits	With Parents	With Relatives
Supervised	2	1
Unsupervised	1	1

Who Supervises Visits	With Parents	With Relatives
LDSS Agency Representative		1
Other Agency Representative		
Biological Family Member		
Foster Parent	1	
Other	1	

Where do Visits Occur?	With Parents	With Relatives
Parent/Relative Home		
LDSS Visitation Center		
Public Area	1	
Child's/Youth's Placement	2	2
Other		

Overnight Stays	With Parents	With Relatives
Yes	1	1
No	2	1

The local boards found that 4 (40%) of the 10 children/youths had siblings in care. None of the 4 children/youths had visits with siblings in care who did not reside with them.

Barriers/Issues

The local boards identified the following barriers to permanency/issues:

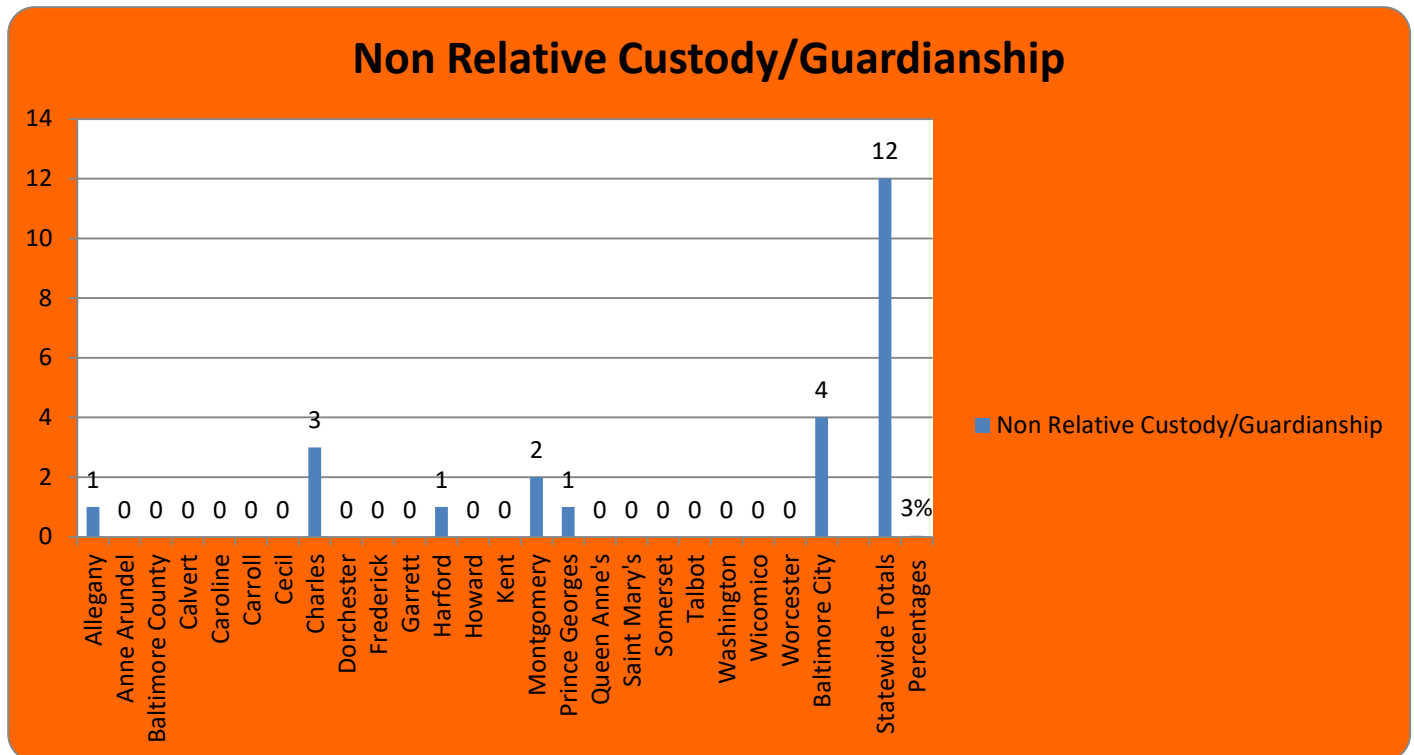
- Youth placed outside of home jurisdiction.
- Lack of concurrent planning.
- No service agreement with youth.
- Missing or lack of documentation.
- Annual physicals not current.
- Dentals not current.
- Vision not current.
- Child has behavior problems in the home.
- Not following up on referrals.
- Other child/youth related barrier.
- No follow up on medical referrals.

Summary

Based on the findings of the review the local boards determined that the local Department of Social Services made adequate progress towards a permanent placement (COMAR – 07.01.06.05 (F)) for all 10 children reviewed.

Non-Relative Custody/Guardianship Reviews

Custody and guardianship is another option that local departments can explore for permanency, and that is made available to a caregiver that would like to provide a permanent home for a child/youth, without having the rights of the parents terminated. This plan allows the child/youth to have a connection with their external family members.



Age Range	Statewide Totals	Custody/Guardian	Percentage
Age 1 thru 5	42	0	N/A
Age 6 thru 10	30	1	3%
Age 11 thru 13	50	2	4%
Age 14 thru 16	80	5	6%
Age 17 thru 19	79	4	5%
Age 20	104	0	N/A
Total	385	12	3%

Permanency

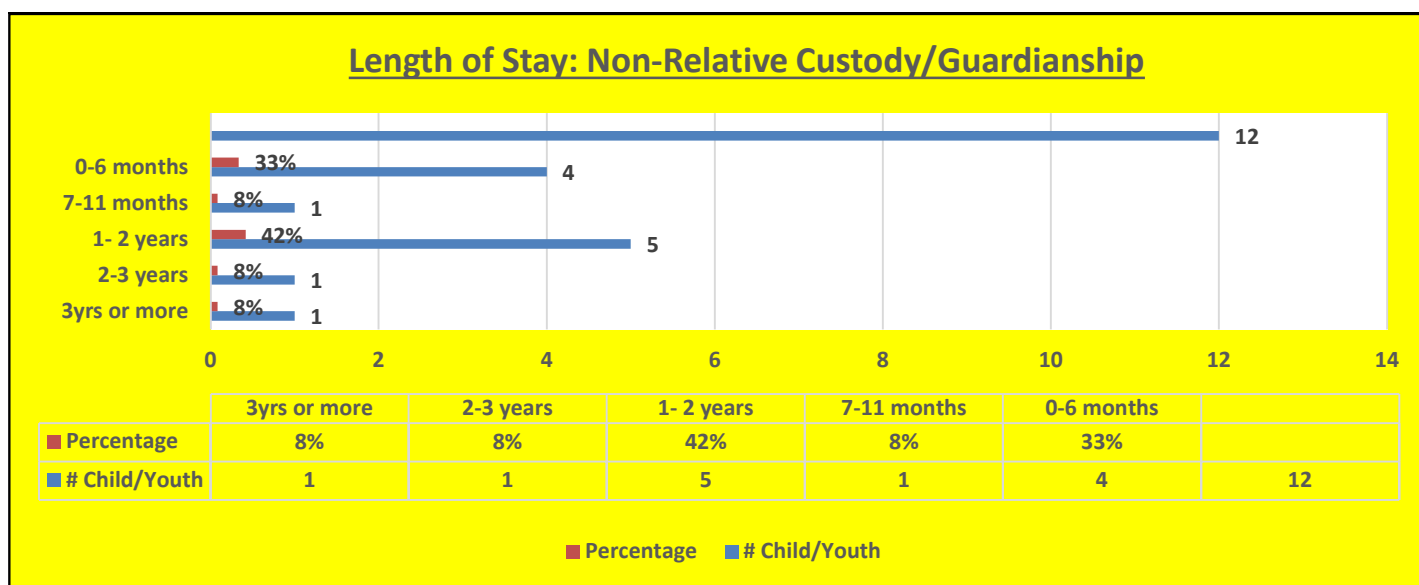
The local boards agreed with the permanency plan of non-relative custody/guardianship for all 12 cases reviewed.

The local juvenile courts identified a concurrent permanency plan for 2 (17%) of the 12 cases reviewed.

The local departments were implementing the concurrent plans set by the local juvenile courts for the 2 cases.

Length of time child/youth had a plan of Non-Relative Custody/Guardianship

Of the 61 cases reviewed the local boards found that the length of time the child/youth had a plan of Non Relative Custody/Guardianship were as follows:



Case Planning

Family Involvement Meetings (prior to entry): The local boards found that the local departments held family involvement meetings prior to entry for 8 (67%) of the 12 cases reviewed.

Service Agreements: The local departments had signed service agreement for 3 (25%) of the 12 cases. Efforts to involve the families in the service agreement process were made for 4 (33%) of the 12 cases reviewed.

The local boards found that the service agreements were appropriate for the 3 signed cases.

Placement/Living Arrangement (LA)

Number of Cases	Placement/Living Arrangement (LA)
1	Formal Kinship Care
2	Regular Foster Care
4	Treatment Foster Care
0	Treatment Foster Care (Private)
1	Residential Group Home
0	Teen Mother Program
1	Therapeutic Group Home
1	Residential Treatment Center
2	Unapproved Living Arrangement (LA)

The local boards found that for 4 (33%) of the 12 cases reviewed the children/youths were placed in settings that were in close proximity to their communities which allowed for the continuity of services.

The local boards agreed with the placement plan for 9 (75%) of the 12 cases reviewed.

Placement Stability

The Local boards found that for 7 (58%) of the 12 cases reviewed there was a change in placement within the 12 months prior to the review. 3 (43%) of the 7 cases had 1 placement change, 3 (43%) had 2 changes and 1 (14%) had 4 or more placement changes.

A family involvement meeting took place with the most recent placement changes for 4 (57%) of the 7 cases.

The following levels of care were found for the 7 most recent placement changes:

- 2 (29%) were in more restrictive placements
- 4 (57%) had the same level of care
- 1 (14%) child/youth on runaway

The local boards found that the primary positive reasons for the 7 most recent placement changes were:

- Transition towards a permanency goal: 2 cases

Provider specific issues for the most recent placement changes were:

- Incompatible match: 1 case

Child/youth specific issues for the most recent placement changes were:

- Behavioral: 2 cases

While child/youth was in the placement from which they were removed, were placement specific services adequate to support the provider:

d) Yes, for 3 cases

For the current placement, is there a match between the child/youth's needs and the provider's ability to meet those needs?

d) Yes, for 3 cases

Health/Mental Health

- Developmental/Special Needs: The local departments reported that 2 (17%) of the 12 children/youths reviewed had developmental or special needs.
- Current Physical: 6 (50%) children/youths had a current physical exam.
- Current Vision: 4 (33%) children/youths had a current vision exam.
- Current Dental: 3 (25%) children/youths had a current dental exam.
- Follow-up Health Concerns: The local departments ensured that appropriate follow-ups occurred on all health concerns noted by a physician for 1 (25%) of 4 eligible children/youths.
- Completed Medical Records: The local departments reported that 2 (17%) children/youths had completed medical records in their case files.
- Prescription Medication: 5 (42%) children/youths were taking prescription medication.
- Prescription Medication Monitored: Prescription medication was being monitored regularly for the 5 children/youths.
- Psychotropic Medication: 5 (42%) children/youths were taking psychotropic medication.
- Psychotropic Medication Monitored: Psychotropic medication was being monitored at least quarterly for all 5 children/youths.
- Mental Health Issues: 8 (67%) children/youths had mental health issues.
- Mental Health Diagnosis: 8 (67%) children/youths had a mental health diagnosis.
- Mental Health Issues Addressed: Yes, for 5 (63%) of the 8 children/youths.

- Mental Health Issues/Transitioning/Services: Not applicable. None of the youths with mental health issues, were transitioning out of care.
- Substance Abuse: 3 (25%) children/youths had a substance abuse problem.
- Substance Abuse Addressed: Yes for 1 (33%) of the 3 children/youths.
- Behavioral Issues: 9 (75%) children/youths had behavioral issues.
- Behavioral Issues Addressed: Yes, for 7 (78%) of the 9 children/youths.
- The local boards found that the health needs of 3 (25%) of the 12 children/youths had been met and 2 children/youths refused to comply with standard health exams.

Education

9 (75%) of the 12 children/youths reviewed were enrolled in school or another educational/vocational program. All 9 were in Pre-K through 12th grade. The 3 children/youths not enrolled in school or another educational/vocational program refused to attend school.

5 (56%) of the 9 children/youths enrolled in school or another educational/vocational program had a 504 or IEP plan. 3 (60%) of the 5 had a copy of the 504/IEP plan in the child/youth's record.

A current progress report/report card was available for review for 6 (67%) of the 9 children/youths enrolled in school or another educational/vocational program.

The local boards agreed that 8 (89%) of the 9 children/youths enrolled in school or another educational/vocational program were being appropriately prepared to meet educational goals.

Ready by 21

➤ Employment (age 14 and older – 9 cases)

1 youth was employed or participating in paid or unpaid work experience.

The local boards agreed that 2 youths were being appropriately prepared to meet employment goals.

➤ Independent Living Services (age 14 and older – 9 cases)

The local boards agreed that 2 (22%) of the 9 youths were receiving appropriate services to prepare for independent living.

➤ Housing (Transitioning Youth – None)

(Age 20 with a permanency plan of APPLA or planning to exit to independence within a year from the review)

Not applicable.

Risk and Safety

The local boards agreed that safety and risk protocols were followed for 10 (83%) of the 12 children/youths.

CASA (Court Appointed Special Advocate)

The local boards found that for 5 (42%) of the 12 cases reviewed the children/youths had a court appointed special advocate.

Child Visits with Parents, Relatives and Siblings

Child Visits	With Parents	With Relatives
Yes	2	1
No	10	11

Frequency of Visits	With Parents	With Relatives
Daily		
Once a week	2	
More than once a week		
Once a month		
More than once a month		1
Quarterly		
Yes, but undocumented		

Supervision of Visits	With Parents	With Relatives
Supervised	1	
Unsupervised	1	1

Who Supervises Visits	With Parents	With Relatives
LDSS Agency Representative	1	
Other Agency Representative		
Biological Family Member		
Foster Parent		
Other		

Where do Visits Occur?	With Parents	With Relatives
Parent/Relative Home		1
LDSS Visitation Center		
Public Area		
Child's/Youth's Placement		
Other	2	

Overnight Stays	With Parents	With Relatives
Yes		1
No	2	

The local boards found that 3 (25%) of the 12 children/youths had siblings in care. 1 child/youth had visits with siblings in care who did not reside with them.

Barriers/Issues

The local boards identified the following barriers to permanency/issues:

- Lack of concurrent planning.
- No service agreement with youth.
- No current IEP.
- Annual physicals not current.
- Dentals not current.
- Vision not current.
- Youth placed outside of home jurisdiction.
- Board does not agree with current permanency plan.
- Inadequate preparation for independence.
- Other independence barrier.
- Other education barrier.

Summary

Based on the findings of the review the local boards determined that the local Department of Social Services made adequate progress towards a permanent placement (COMAR – 07.01.06.05 (F)) for 6 (50%) of the 12 children reviewed

**Citizen's
Advisory Panel for Children**

Priority Statement September 2021
Chair of the Health and Human Services Committee
Montgomery County Council

MISSION STATEMENT From FY2021 Annual Report:

Citizen's Review Panel for Children ("Panel") is charged with examining the policies, procedures, and practices of Maryland and Montgomery County agencies to evaluate the extent to which Montgomery County agencies are effectively fulfilling their responsibility to implement the child protection standards as the panel works collaboratively with the County's Department of Child Welfare Services.

The CRP FY2021 Continued Focus Is as Follows:

- In FY 2021, the Panel asked input from the Department of Health and Human Services, Child Welfare Services to identify two Social Services Administration (SSA) policy areas in which the agency would benefit from an independent Panel review. The two policies selected for FY 2021 were the recruitment and retention of resource families and services for Lesbian, Gay, Bi-Sexual, Transgender and Questioning (LGBTQ) foster youth. In addition, the panel met monthly to review the impact of the pandemic on children and families involved in protective services and to learn the ways that the agency was adjusting in order to continue serving these populations.

Recruitment and Retention of Resource (Foster) Parents:

- The Panel continues to work on this SSA Resource policy issue and has made several preliminary recommendations to the agency.
- The panel met with the Montgomery County Foster Parents Association and is developing an information tool to learn more about the experience of being a resource family in Montgomery County.
- In addition, the Panel discussed with the agency how to analyze data showing where existing resource families live mapped against where the need for resource families is greatest in the county.

LGBTQ Foster Youth:

- The Panel began an assessment of this SSA policy issue by reviewing two prior CWS Resource Home surveys and establishing its own survey, asking Child Welfare staff to complete. The Panel is in the process of reviewing the staff's responses.

Increase Panel Focus/Understanding Role:

- The Panel also laid the initial work to clarify its roles and responsibilities to ensure that its current and planned activities remain within its mission and scope
- In the up-coming year the State CRBC confirmed that it will provide background/resource materials to new Panel members, invite new Panel members to CRBC's pre-service training sessions, and invite all Panel members to all CRBC's in-service training sessions.
- The panel participated in training sessions to further clarify its responsibilities.

The Panel greatly appreciates the support that has been provided by the County Council.

Montgomery County Child Protection Panel report submitted to CRBC for FY2021 Annual Report.

CRBC FY2021 Review Metrics

Total # of Children - Scheduled on the Preliminary:	920
Total # of Children - Closed (adopted, reunified, exited care), Non-Submission:	512
Total # of Children - Rescheduled (DSS caseworker requests, board overload):	104
Total # of Children - Eligible for Review:	408
Total # of Children - Reviewed at the Board:	385
Total # of Children - Not Reviewed at the Board (worker no shows, closed):	23
Percentage of Children Reviewed for the Period:	94%
Percentage of Children Not Reviewed for the Period:	6%
Recommendation Reports to DSS - Number Sent:	336
Recommendation Reports to DSS - Number Sent on Time: ²	175
Recommendation Reports to DSS - Percentage Sent on Time:	52%
Recommendation Reports from DSS - Number of Responses Received: ³	85
Recommendation Reports from DSS - Percentage of DSS Responses:	25%
Recommendation Reports from DSS - Number Received on Time:	67
Recommendation Reports from DSS - Percentage Received on Time	85%
Number of Boards Held	102
Recommendation Reports - Number of DSS Agreement:	80
Recommendation Reports - Percentage of DSS Agreement:	94%
Recommendation Reports - Number of DSS Disagreement:	5
Recommendation Reports - Percentage of DSS Disagreement:	6%
Recommendation Reports - Number of Blank/Unanswered: ⁴	0
Recommendation Reports - Percentage of Blank/Unanswered:	0%
Percentage of REUNIFICATION Children Reviewed for the Period:	36%
Percentage of RELATIVE PLACEMENT - Adoption Children Reviewed:	<1%
Percentage of RELATIVE PLACEMENT - C & G Children Reviewed:	2%
Percentage of ADOPTION Children Reviewed for the Period:	17%
Percentage of CUSTODY/GUARDIANSHIP Children Reviewed for the Period:	3%
Percentage of APPLA Children Reviewed for the Period:	42%

² Due to the COVID-19 pandemic and the Governor of Maryland issuing a mandatory teleworking order effective March 13th 2020, CRBC had to create Virtual Reviews which only occurred in the 3rd and 4th quarters of FY2021 which impacted our on-time rates.

³ The Local Department of Social Services is required by COMAR 07.01.06.06 (H) to respond to the local out-of-home placement review board's recommendations within 10 days of receipt of the report.

⁴ The number of recommendation report responses received from the Local Department of Social Services that did not indicate acceptance or non acceptance of the local board's recommendation.

CRBC FY2021 State Board

Nettie Anderson-Burrs (Chair)

Circuit 4: Representing Allegany, Garrett, and Washington Counties

Delores Alexander (Vice Chair)

Circuit 3: Representing Baltimore and Harford Counties

Dr. Theresa Stafford

Circuit 1: Representing Dorchester, Somerset, Wicomico, and Worcester Counties

Reginald Groce Sr.

Circuit 2: Representing Caroline, Cecil, Kent, Queen Anne's, and Talbot Counties

Dr. Kathy Boyer-Schick

Circuit 5: Representing Anne Arundel, Carroll, and Howard Counties

Sandra "Kay" Farley

Circuit 6: Representing Frederick and Montgomery Counties

Davina Richardson

Circuit 7: Representing Calvert, Charles, Prince George's, and St. Mary's Counties

Beatrice Lee

Circuit 8: Representing Baltimore City

Rita Jones

Circuit 8: Representing Baltimore City

Benia Richardson

Circuit 8: Representing Baltimore City

Denise E. Wheeler

CRBC Administrator

CRBC FY2021 Members

Ms. Carmen Jackson	Mrs. Nechelle Kopernacki	Ms. Melissa Burch
Ms. Shirley Struck	Mrs. Velma Walton	Ms. Iris Pierce
Mrs. Mary Ann Bleeke	Mrs. Roberta Berry	Mrs. Davina Richardson
Ms. Heidi Busch	Mr. Robert Foster Jr.	Mrs. Linda Love McCormick
Mr. David Ferris	Mrs. Denise Joseph	Mr. Kashmere Mims
Mrs. Catherine Gonzalez	Ms. Gail Radcliff	Ms Marilyn Moses
Ms Elaine Reed *	Mrs. Kamilah Way	Ms Jessalyn Schwartz *
Mrs. Linda Robeson	Mrs. Katrena Batson Bailey	Ms. Mildred Stewart
Ms. Delores Alexander	Mrs. Shirley Greene	Ms. Stephanie Vaughn Bovell
Mrs. Jennifer Gill	Mrs. Barbara Hubbard	Ms. Celinda Carr *
Ms. Melissa Parkins-Tabron	Mrs. Portia Johnson-Ennels	Dr. Jessica Denny
Ms. Laura Steele	Dr. Norby Lee	Mrs. Terry Perkins-Black
Ms. Rosina Watkins	Dr. Theresa Stafford	Ms. Elli Straus *
Ms. Juanita Bellamy	Mrs. Vatrice Walker	Dr. Corinne Vinpool
Ms. Beverly Corporal	Ms. Helen Johnson	Mrs. Patricia Duncan
Ms Pashia Covington *	Ms. Lise Robinson *	Ms. Theresa Thomas *
Mrs. Ernestine Jackson-Dunston	Ms. Katie Sillex	Mr. Kirkland Hall Sr.
Mr. David Marshall	Mrs. Sharde Twyman	Ms. Deonna Henson *
Ms. Tamara Vaughn McDuffie	Mrs. Nancy Wiley	Ms. Vanessa Ward *
Mrs. Charlotte Williams	Mrs. Debra Stephens	Dr. Sharon Washington
Mr. Wesley Hordge	Ms. Manolya Bayar	Ms. Stephanie Chester
Ms. Gail McCloud	Mrs. Pamela Dorsey	Mrs. Brenda Gaines-Blake
Mrs. Gwendolyn Statham	Mrs. Virginia Heidenreich	Mrs. Phyllis Hubbard
Mrs. Jean West	Ms. Maureen North	Mrs. Mary Taylor-Acree
Ms. Cherrylynn Williams	Mr. Quintin Seadler *	Ms. Nettie Anderson-Burrs
Ms. Tandra Chisolm	Mr. John Kelly	Mrs Jean Harries
Mrs Anita Fishbein	Mr. Donald Pressler	Ms. Joanne Morgan *
Mr. Edwin Green Jr.	Mrs. Patricia Soffen	Ms. Judith Niedzielski
Mrs. Eunice Johnson	Mr. Kyle Kirby Esq.	Mrs. Karen Nugent
Ms. Gabrielle Shirley	Ms. Deborah Wiener *	Mrs. Yvonne Armwood
Ms. Nicole Cooksey	Ms. Alison Obrien	Ms. Doretha Henry
Ms. Denise Lienesch	Ms. Alicia Prager Stern	Mr. Robert Horsey
Ms. Janet Fountain	Ms. LaVerne Stringfield *	Ms. Karen Milbourne-Haggins
Mr. Reginald Groce Sr.	Ms. Florence Webber	Ms. Jeronna Truitt-Smith
Mrs. Wanda Molock	Ms. Sandra Farley	Mrs. Helen Lockwood
Dr. William Dash *	Mrs. Susan Fensterheim	Mrs. Terry Smith
Ms. Courtney Edwards	Mrs. Janis Tabor	Mrs. Valerie Turner
Ms. Adelaide Lagnese	Ms. Sandra Dee Hoffman	Mrs. Tara Armstrong
Ms. Kimberly Odam *	Ms. Cheryl Keeney	Ms. Otanya Brown
Ms. Carmen Shanholtz	Mrs. Claire McLaughlin	Ms. Joyce Carter *
Ms. Dianne Fox	Mr. David Schardt	Dr. Thomas Dorsett
	Mr. Erwin Brown Jr.	

Ms. Joann Henson *	Mrs. Rita Jones	Dr. Walter Gill
Mr. Reed Hutner	Ms. Lisa Jordan *	Mrs. Helene Goldberg
Ms. Stephanie Lansey	Mr. Dennis Lee	Ms. Suzanne Parejo
Ms. Charmika Burton	Mr. James Myers	Ms. Benia Richardson
Ms. Jackie Donowitz	Mr. Tyler Alcorn	Dr. Patricia Whitmore-Kendall
Mr. Leon Henry	Ms. Katrina Brooks *	
Mrs. Jennifer Joyner *	Ms. Rosemarie Mensuphu-Bey	Ms. Barbara Crosby
Ms. Beatrice Lee		Ms. Terri Howard
Mrs. Rasheeda Peppers	Ms. Ella Pope	Ms. Britonya Jackson
Ms. Elizabeth Williams	Mr. Gregory Riddick	Ms. Ginnie McKnight *
Ms. Sharon Buie	Ms. Valerie Sampson	Ms. Deanna Miles-Brown
	Mrs. Roslyn Chester	Mr. Cortly Witherspoon *

*** New Members appointed by the Governor in fiscal year 2021.**

CRBC FY2021 Staff Members

Denise E. Wheeler
Administrator

Crystal Young, MSW
Assistant Administrator

Agnes Smith
Executive Assistant

Jerome Findlay
Information Technology Officer

Hope Smith
IT Functional Analyst

Fran Barrow
Child Welfare Specialist

Michele Foster, MSW
Child Welfare Specialist

Marlo Palmer-Dixon, M.P.A
Child Welfare Specialist

Sandy Colea, CVA
Volunteer Activities Coordinator Supervisor

Rhonda Watties,
Volunteer Activities Coordinator II

Cindy Hunter-Gray
Lead Secretary

Lakira Whitaker
Office Clerk

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COMAR 07.02.11.03. Out of Home Placement: Definitions. Title 07 Department of Human Services (formerly Dept. of Human Resources).

COMAR 07.02.11.08. Out of Home Placement: Medical Care. Title 07 Department of Human Services (formerly Dept. of Human Resources).

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