

Maryland Department of Human Resources
Advisory Council for Alternative Response

Meeting, August 14, 2012
Minutes

Council Member Attendees: Secretary Ted Dallas, Dr. Pamela Brown, Janet Forrester Hartge, Dr. Scott Krugman, Richard Paulman, Melissa Rock, Cathy Surace, Vanita Taylor, David Thompson, James Trent, Dr. Albert Zachik,

Ex Officio Attendees: Tracy Watkins-Tribbitt, Paul DiLorenzo,

SSA Representatives: Sandra Barnes, Steve Berry, Shanda Crowder, Carnitra White, Linda Carter, Audrey McLendon

Other attendees: Al Passarella, Delores Edwards, Jeanne Marks, Brian Schleter, ML Wernecke, Carol Spigner, Michelle

Welcome and Introductions

Secretary Ted Dallas welcomed the members to the meeting. Introductions were made. The Secretary asked that each Workgroup remind the Council of the Workgroup Charge before reporting out.

The Workgroups reported on their progress:

Policy Workgroup

Charge: The Policy Workgroup will develop recommendations for the Advisory Council regarding parameters for Alternative Response (AR) to include definitions, scope and policy guidance for full implementation. The workgroup will also develop recommendations for the AR implementation plan and requirements for MD CHESSIE enhancements.

Co-chair Dick Paulman reported on the Policy Workgroup's progress. A summary of the workgroup's discussion was distributed. Mr. Paulman reviewed the assumptions that the Policy Workgroup drafted regarding Alternative Response cases. Cases that will be assigned to the AR track are cases that DHR currently accepts: 1) The cases must meet the criteria for abuse and neglect 2) The screener makes decisions to screen in/out using Structured Decision Making 3) AR or Investigation decision is subsequent to and completely separate from the screening decision.

Members of the Council discussed the information in the draft document. Some issues to consider: Ensure that AR decision making is standard statewide, evaluate the impact of AR in practice, and determine the policy for switching a cases from the AR track to the investigation track or from investigations to AR. Failure to Thrive is a report that may need to be reconsidered if related to a medical condition. Failure to Thrive due to a

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medical condition may qualify as an AR case; Failure to Thrive due to parenting may qualify as a CPS case. Mental Injury is also difficult to diagnose and determine for AR or CPS.

The Policy Committee has requested information regarding tools and practices and would like to review information from other states prior to making any recommendations about changing the current Structured Decision Making Tool.

Other questions that the Council may want to address with the Policy Workgroup should be forwarded to Audrey McLendon, amclendo@dhr.state.md.us for distribution to the Workgroup.

Practice Workgroup

Charge: The Practice Workgroup will develop recommendations for the Advisory Council regarding: training, staffing, and communication needs for a dual track CPS system. The Workgroup will also explore the interface between CPS, law enforcement, the courts, and community service providers and provide recommendations regarding best practice.

Co-Chair David Thompson reported that the workgroup is in the planning stages; the Practice changes are dependent on the Policy Workgroup. The workgroup is determining other representatives that should be part of the workgroup, law enforcement, caseworkers, and management.

The workgroup noted that the timing of the AR training will need to be reviewed carefully. Training should occur close to the implementation date. The University of Maryland Child Welfare Academy staff is researching other states' AR training and practices. The workgroup will consider jurisdiction size when developing practice recommendations. It was noted that AR will require a culture change for local departments of social services as well as stakeholders and advocates. The workgroup is developing types of training to conduct for stakeholders and advocates and will work with the Community Partners workgroups to develop a Communication Plan. Issues under consideration: Identify the groups that need training, how will information / training be shared (internet, email, etc)? How will supervisors sort the risk levels? Practice Workgroup will identify skill set (critical thinking reinforced by supervisor). A suggestion was made to include caseworkers and supervisors in the development of the training curriculum.

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Community Partners

Charge: The Community Partners Workgroup will engage stakeholders and review existing community and statewide resources in order to develop recommendations for a community resource plan to support the implementation of Alternative Response. The workgroup will also organize informational stakeholder meetings to be held across the State.

Co-chair Dr. Pamela Brown reported that the workgroup is identifying the key partners and the role each partner plays. Lists of stakeholders from Local Management Boards are being developed. The workgroup is also discussing outreach, reviewing how other states worked with Community Partners, developing information to create excitement around AR while reducing families' negative perception of the DSS. It was suggested to review and add Drug Treatment Providers, Pediatricians, Health Departments and the Family Tree to the stakeholder list.

Other issues discussed were how to engage partners once DSS closes the case, how do we ensure families receive the needed services, and track progression once closed? A concern was expressed that the local jurisdictions' staff may not be aware of the services available or that service gaps exist. SSA partners with community partners, follow-up, build-in practice on policy referrals and stakeholders.

Evaluation

Charge: The Evaluation Workgroup will develop recommendations for the scope and structure of the evaluation as outlined in the authorizing statute.

Co-chair Melissa Rock reported that the workgroup developed a list of outcome measures and is in the process of ranking the outcomes by importance. The group will post the outcomes to the website and encourages the council to add rankings or other outcomes. Questions under discussion: How will evaluations occur? How did other states evaluate outcomes?

General Discussion:

Other Concerns: How will AR be implemented statewide?

Additional Questions and Comments may be sent to Audrey McLendon at amclendo@dhr.state.md.us.

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The next meeting will be held Tuesday, September 11, 2012 at 1:00 pm at 311 W. Saratoga St., Room 1044, Baltimore, MD.