

**Maryland Department of Human Resources
Child and Family Services Plan
2006 Annual Progress and Services Report
Title IV-B Plan**



Maryland's Human Services Agency

Putting Children First

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Governor

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June 2006

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EXECUTIVE SUMMARY

Vision:

The Maryland Department of Human Resources, Social Services Administration (DHR/SSA) envisions a Maryland where all children are safe from abuse and neglect, where children have permanent homes and where families are able to meet their own needs.

Mission:

To lead, support and enable local departments of social services in employing strategies to prevent child abuse and neglect, protect vulnerable children, preserve and strengthen families, by collaborating with state and community partners.

This is the second year of the Annual Progress and Service Report of Maryland's 2005-2009 IV-B Child and Family Services Plan which outlines how Maryland intends to carry out its mission and vision and meet its goals and objectives to promote and ensure safety, permanence, and well-being for children and families. This report also includes activities in the following programs: 1) Promoting Safe and Stable Families; 2) Indian Child Welfare Act; 3) Foster/Adoptive Parent Recruitment; 4) Training and Staff Development; and 5) Quality Assurance. Updates on the Child Abuse Prevention and Treatment Act, Chafee Foster Care Independence Program, and Education and Training Vouchers grants are also provided in this report.

Over the past two years Maryland Department of Human Resources/Social Services Administration (DHR/SSA) has engaged in a number of efforts to assist in meeting its goals and objectives. These efforts include:

The Design and Implementation of MDCHESSIE

Maryland has designed and developed a Statewide Automated Child Welfare Information System (SACWIS) that will assist child welfare staff in managing their caseloads and provide accurate and current data to assist in decision making and program modifications. The system will be implemented statewide by December 2006.

The Child and Family Services Review Program Improvement Plan

This plan outlines Maryland's projected activities to improve child welfare outcomes as well as systemic factors identified in the Federal Child and Family Services Review (CFSR). Maryland is in the second year of its PIP which will be

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completed in March 2007. The PIP goals and actions have been included in the CFSP.

Maryland – Child and Family Services Reviews

Consistent with the findings of the CFSR, Maryland has redesigned and implemented an improved quality assurance system. Maryland's three tier system is modeled after the federal child and family service review which is designed to measure the quality of services through the use of local self assessments, supervisory assessments, and local on-site assessments.

This annual report attempts to include updates on activities to improve Maryland's child welfare services and programs as well as align the goals and objectives with those of the PIP. Recommendations from the Child and Family Services Advisory Committee and the PIP Steering Committee are also incorporated in this report.

MARYLAND'S CHILD WELFARE SERVICES

The Maryland Social Services Administration (SSA) oversees the administration of child welfare programs that are to some extent federally funded, State supervised and State administered. All services are provided through the twenty-four local departments of social services (one in each county and in Baltimore City). The SSA is responsible for the coordination and supervision of programs and services funded by federal titles IV-B, IV-E, and XX of the Social Security Act. The SSA directs and supervises the development and implementation of state policies and programs that carry out the mission and goals of Maryland's child welfare services. The child welfare services under the oversight of SSA include:

In-Home Services

Child Protective Services are specialized social services for children, who are believed to be neglected or abused, and their parents or other adults having permanent or temporary care, custody, or parental responsibility, and household or family members. These services assess risk and safety of the child and decrease the risk of continuing physical, sexual or mental abuse or neglect. In instances where a child can be safely protected in his or her own home through the provision of services or other assistance to the child's family, such an alternative is preferable to foster care placement.

In-Home Family Preservation represents a continuum of programs available within the local departments of social services. These programs are specifically

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identified for families in crisis whose children are at risk of out-of-home placement. Family preservation actively seeks to obtain or directly provide the critical services needed to enable the family to remain together in a safe and stable environment.

In SFY 2005, approximately 31,501 CPS investigations were conducted of which 10,755 were physical abuse, 3,819 sexual abuse, 14,413 neglect, and 128 for mental injury abuse and neglect.

Out-Of-Home Placement Services

Foster Care services provide short-term care and supportive services for children that have been physically or sexually abused, neglected, abandoned, or at high risk of serious harm or voluntarily placed because of parent/legal guardians need for short term placement of the child's mental illness or developmental disability. Services are provided to treat the needs of the child and help the family with their need to know how to care for the child. Children are placed with a foster family in their community, if possible or in a purchase of care placement recommended by the treating professional. All attempts are made to keep the child in close proximity to their family; however, the child's placement is based on the treatment needs of the child and the availability of placement resources. Time-limited reunification services are provided using concurrent permanency planning to reunite with the birth family or to pursue a permanent home for the child within 15 months of the placement. Permanency planning options that are considered in order of priority:

- Reunification with parent(s)
- Permanent Placement with Relatives (includes guardianship or custody)
- Adoption (relative or non-relative)
- APPLA (Another Planned Permanent Living Arrangement)

The Foster Care Program in the State of Maryland features a family centered approach that encourages foster parents to play an active role with the birth family in planning and carrying out the goals of the permanency plan. Using the family centered premise, foster children are placed in homes that are in their own community thereby keeping the children connected to their home school, friends and resources within their neighborhood.

Independent Living Services (ILS) provide independent living preparation services to older youth in foster care 14 to 21 years of age in preparation for adulthood. The goal of the Maryland Independent Living Preparation Program is

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to assist youth to make a successful transition from out-of-home placement to self-sufficiency.

In FFY 2005, Maryland provided foster care services for 10,725 children. Of those approximately 4,553 children received ILS.

Kinship Care services help support children who reside outside of their own home, either temporarily or for the long term, with relatives. For children who come to the attention of the child welfare system, Kinship Care creates another placement option for a child who may not be able to continue living at home with his or her parents. Kinship Care supports the concept of children residing with a relative to alleviate family stress or temporary familial problems, rather than being placed in a foster home or other type of out-of-home placement. Kinship Care offers services to support the needs of the children and relative caregivers along with providing assistance for crisis circumstances confronting the biological parents who are unable to care for their children. Kinship Care emphasizes the continuity of family connections that may not be as strong in regular foster care settings while promoting concurrent permanency planning for the children in these kinship care placements. In FFY 2005, Maryland provided kinship care services for approximately 1,900 children.

Adoption Services develops permanent families for children who cannot live with or be safely reunited with their birth parents or extended birth families. The Maryland Adoption's Program is committed to assisting local departments of social services and other partnering adoption agencies in finding "Forever Families" for children in the care and custody of the State. Adoption services include study and evaluation of children and their needs; adoptive family recruitment, training and approval; child placement; and post-adoption support. The adoption program includes initiatives such as dual approval of resource homes; open adoption when it is in the child's best interest; statewide recruitment of resource homes; the Maryland Voluntary Adoption Registry; the Adoption Search, Contact and Reunion Services (ASCRS) Program; the Maryland Adoption Resource Exchange (MARE) Program; One Church, One Child (OCOC) Recruitment Program; adoption support groups; subsidized adoption; non-recurring adoption expenses reimbursement; the Interstate Compact on Adoption and Medical Assistance (ICAMA); and the Interstate Compact on the Placement of Children (ICPC). Maryland's child welfare services continue to emphasize concurrent permanency planning and dual approval of resource homes to increase the number and timeliness of adoptions of children in out of home placements. As of December 2005, Maryland local departments of social services had 641 children legally free with a goal of adoption. Approximately 200 of these children do not currently have an identified adoptive resource.

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Interstate Compact on the Placement of Children (ICPC) ensures that children in need of out-of-home placement in and from other states receive the same protections guaranteed to the children placed in care within Maryland. The law offers states uniform guidelines and procedures to ensure these placements promote the best interests of each child.

Resource Development and Support Services works with stakeholders to identify and develop strategies to improve the array of services available to support children and families in achieving safety, permanence and well-being. Also included in these services is the oversight recruitment and support of Foster/Adoptive Parents. In FY '05, Maryland local departments of social services approved 744 new families as foster and adoptive placements.

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**CHILD AND FAMILY SERVICES PLAN GOALS, OBJECTIVES and
ACCOMPLISHMENTS**

The goals and objectives listed below have been revised to align with the goals and objectives of the PIP; and the Child Welfare Accountability Act (Maryland HB 799), Study on Differential Response (HB 1648), Building Capacity to Serve Children in their Communities (HB 870) which passed during the 2006 Maryland Legislative Session. The goals and objectives are organized in three categories Safety, Permanence, and Well-being. The Social Services Administration (SSA) has set five major priority areas under which its PIP strategies and goals are organized.

CHILD SAFETY OUTCOMES

The SSA is committed to protecting children first and foremost from abuse and neglect; maintaining children safely in their homes when possible and appropriate; reducing incidents of repeat maltreatment when children are under the care of their families; and protecting children placed in foster care from further maltreatment. A number of tools and strategies are used to assure the safety and well-being of children who come to the attention of the child welfare system. These strategies include comprehensive risk-based assessment and service planning; family-centered; supervisory mentoring and monitoring of case activity related to safety; and exploration of flexibility in responding to reports of abuse and neglect. The safety goals, objectives and strategies are linked to Priority One of the PIP.

Goal 1: Children are first and foremost safe from abuse and neglect, maintained safely in their homes whenever possible and appropriate, and services are provided to protect them. (Revised)

Objectives:

- 1.1: By June 30, 2009, 7.1% or less of cases will experience repeat maltreatment with in 12 months of case closure. (New)**
- 1.2: By June 30, 2009, .057% or less of children in foster care will experience maltreatment from foster parents or facility staff members (New)**

To achieve these objectives, SSA is focusing its efforts on:

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- Developing and implementing family-centered practice (PIP Action Step 1.1)
- Implementing Risk Based Service Planning (PIP Action Step 1.7 & 1.8)
- Completing a study on the implementation of a research based differential response system for allegations of child abuse and neglect
- Partnering with the Maryland Wraparound Initiative

1. Family-Center Practice

Maryland is working to develop and implement a family-centered practice approach. This approach is based upon the notion that identifying and developing family strengths is the key to solving family problems which will lead to greater child safety and better long-term outcomes for families. Efforts to review and revise policies and practice to ensure a family centered approach are currently in process as outlined in the benchmarks of the PIP. Maryland's comprehensive family assessment system uses an array of tools to determine a family's ability to provide a safe, nurturing environment for their children. Each tool serves a specific assessment function that captures both risk and safety concerns, as well as a family's capacity to protect.

The tools are as follows: a) the Maryland Family Risk Assessment which identifies issues that pose long-term concerns for child abuse and neglect and concludes with a determination regarding a family's need for service; b) SAFE-C is the tool that guides and supports an assessment of immediate safety concerns for children in family settings (birth, relative or out-of-home); c) SAFE-GRP is used when considering safety concerns that may exist for children residing in group placements; d) the In-Home Services Progress Review used in conjunction with service and case planning is rooted to risk and safety assessments and comprises Maryland's risk-based service assessment; e) the North Carolina Family Assessment Scales (NCFAS) a strength-based family functioning assessment tool which measures changes in a family's ability to care for their children and become self reliant. Each tool, except for NCFAS, was developed with consultation from the National Resource Center on Child Abuse and Neglect (now Child Protective Services). Finally, Out-of-Home Services staff provide permanency-planning services by utilizing a case planning process that documents, organizes and analyzes casework services to families and their children in the temporary custody of a local department. These tools have been embedded in Maryland Statewide Automated Child Welfare Information System – MD CHESSIE.

2. Implementing Risk Based Service Planning

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Maryland has developed a risk-based service planning model that helps caseworkers to target the efforts of their client/family's and their own on items identified in safety and risk assessments. Service Plans now have goals and objectives that are directly tied to safety, permanency and child well-being. Every service-related activity must be anchored to an objective and goal that increases safety and reduces the risk of future maltreatment, which in turn enhances a child's safety, permanency and well-being. Staff, with input from the family, must choose a goal from items pulled directly from the federal review (e.g., children are first and foremost protected from abuse and neglect; families have enhanced capacity to provide for their children) when beginning to create a Service Plan. Supervisors are required to review Service Plans for compliance with concepts central to the model and approve work of their caseworkers only when Service Plans accurately target risk and safety issues.

Accurate assessment followed by targeted service interventions should increase safety for children, reduce the recurrence of maltreatment and promote healthy family development. Previous efforts to improve service planning have found some success, but as the federal review indicated, have not produced the results that had been projected. This effort differs from others in that service planning is viewed as a natural outgrowth of assessment, and supervisors play a pivotal role in planning, reviewing and evaluating Service Plan effectiveness.

3. Differential Response System Study

The Maryland General Assembly passed HB 1648 "Child Abuse and Neglect - Differential Response System Study" which requires the Department of Human Resources to conduct a study on the implementation of a differential response system for allegations of child abuse and neglect in the State. The Department must submit a report on the findings and statutory recommendations of the Study on or before December 1, 2006. The study will include: definitions of levels of safety concern; timeframes for initiating and completing responses to allegations of abuse and neglect; the development of a database of child welfare programs within local departments of social services and community resources; the determination of existing capacity outside the child protective service system to meet the needs of lower risk families; and the identification of services and funding to fill gaps. The DHR/SSA is also required to develop a plan to evaluate workload; multidisciplinary responses relating to mental health; substance abuse assessment and treatment; domestic violence and related services for children and families; and the role of law enforcement, training requirements including costs, implications for reporting statistics and recommendations for statutory changes.

4. Maryland Wraparound Initiative

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The Wraparound model is centered on the child and family, recognizes child and family strengths, is community-based, culturally competent, and coordinated across agencies. The model Wraparound process encompasses the following ten philosophical principles: 1) community-based; 2) team-driven; 3) families are partners; 4) individualized and strengths-based; 5) culturally competent; 6) flexible funding; 7) balance of formal and informal supports; 8) unconditional commitment; 9) collaboration; and 10) outcomes determined and measured. The Wraparound process treats the child in the community by forming a team of services and supports around the child and family. Members of the team may include other family members, providers of service, and the family's informal support networks.

With the Maryland Governor's Office for Children (GOC) as the lead, a Wraparound Committee has been established to create a wraparound system of care in Maryland in conjunction with the National Wraparound Initiative. This committee will recommend policies, practices, and systems that best support the elements of the wraparound process and its implementation in local communities. The committee will examine those systems in Maryland which need to be supported or altered to promote community-based care. Recommendations from the committee will include, but are not limited to, description of the target population(s), funding streams, outcomes, training, and family support.

In Maryland, the priority for wraparound services is centered on the following populations: children with the greatest needs; those who have been least well-served by the current system of care; and those who have the best chance for success with the wraparound approach. Children and adolescents must be under 21 years of age, have a primary mental health diagnosis, may have underlying dual diagnoses, and must meet one of the following criteria a:

- child in an in-state public or private RTC;
- child in an out-of-state RTC;
- child receiving services through the Family League of Baltimore City;
- child receiving services funded by Baltimore Mental Health Service's inpatient diversion funds;
- child receiving services through the Prince George's County Local Management Board;
- child who has had at least three psychiatric hospitalizations in one year or five in a two-year period or has been in a psychiatric inpatient facility for more than 30 consecutive days or is classified as a "stuck kid";
- child awaiting, recommended, referred or approved for RTC placement;
- child committed or on probation to DJS, pending placement in a RTC; or

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- child in the custody of DJS or DHR who has been diagnosed with a primary mental health diagnosis or substance abuse.

Action Steps, Benchmarks and Accomplishments for these efforts are included in the attached matrix.

PERMANENCE OUTCOMES

The Social Services Administration is committed to ensuring that children are in a home that is safe and provides an environment where they have an opportunity to grow into a healthy adulthood. Maryland's goal is to develop and maintain living situations that will afford a child permanency and stability while allowing for continuity of family relationships, on-going connections with friends and community. Twenty-three counties in Maryland and Baltimore City operate foster care programs which work with the birth and foster families to develop the most appropriate permanency plan for each child. Maryland works to ensure that reunification, adoption, guardianship, alternative permanent placement, or transition from foster care to independent living occurs in a timely manner for children who are placed in out-of-home care. Birth and foster families are assisted in obtaining the services, such as counseling and health care, needed to meet the goals of the permanency plan. Each foster care program also works to recruit, train, approve and retain foster care providers.

The Foster Care Program in the State of Maryland is implementing a family-centered practice model that will encourage foster parents to play an active role with the birth family in planning and carrying out the goals of the permanency plan for the child in care. Using a family-center approach, foster children are placed in homes that are in their own community thereby keeping the children connected to their school, friends and resources within their neighborhood.

Goal 2: Children will achieve permanency within a timely fashion, have stability in their lives and placements, and maintain connections to families and communities. (Revised)

Objectives:

- 2.1 By June 30, 2009, the percent of children reentering care within 12 months of a prior foster care episode will be 8.6% or less. (New)**

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- 2.2 By June 30, 2009, the percent of children in care for less than 12 months who experience no more than 2 placement settings will be 86.7% or more. (New)**
- 2.3 By June 30, 2009, 85% or more of children will be placed in or in proximity to their community of origin. (New)**
- 2.4 By June 30, 2009, 25% or more of the all children who are adopted will be so within 24 months of their entry into foster care. (New)**
- 2.5 By June 30, 2009, 60% or more of all children will be reunified with parents within 12 months of their entry into foster care. (New)**
- 2.6 By June 30, 2009, the median length of stay by entry cohort for children in out-of-home placements will be 24 months or less. (New)**

To achieve these objectives, SSA is focusing its efforts on:

- Developing and implementing family-centered practice (PIP Action Step 1.1)
- Implementing Concurrent Permanency Planning (PIP Action Steps
- Recruit and Retain Foster/Adoptive Parents (PIP Action Step 4.2)
- Collaboration with the Governor's Office for Children in the Implementation of the State Resource Plan (PIP Action Step 4.5)
- Collaboration with the Foster Care Court Improvement Project (PIP Action Step 2.1)

1. Family-Centered Practice

Maryland is adopting Family-Centered Practice which is a clinical approach to working with children, families and communities to provide resources and services. This approach requires strong supportive collaboration, as well as strong relationships in the development of partnerships within the community and local departments. This comprehensive approach to service delivery provides a continuum of care to families and children from prevention to placement. In Maryland a redesigned **comprehensive family assessment system** and the implementation of a **Family Centered Practice Model** will be used as a framework to deliver child welfare services.

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The family-centered philosophy consists of a set of value driven principles that guide specific strategies and use practical tools for implementation. The philosophy includes:

- Caseworkers are family workers not just child workers;
- Foster parents model as co-parents, mentors and family team members; and
- Children in out-of home placement remain in their own community.

The paradigm shift to neighborhood-based, family-centered practice directly ties the identified resource needs of the family to service delivery creating a seamless service delivery system. This approach requires the provision of more **Placement Prevention Services**, the primary model being family preservation. The model is designed to provide front-loaded services and prevent out-of-home care. The use of this practice should eliminate interruption in service delivery and duplication of services. This non-threatening practice will empower families and communities to take responsibility for their children.

2. Concurrent Permanency Planning

Maryland also uses concurrent permanency planning which allows the application of several permanency plans at one time to reduce the length of time the child stays in out-of-home placement. While working with the birth family toward reunification, there is an alternative plan in place. Concurrent permanency planning involves planning for a child's permanent placement in a way that reduces the number of moves the child must make. The child is placed in a home where the child can remain permanently if return to the family fails. Counseling and therapy for the child and birth family, education, and health services for the child as well as any necessary supportive services to sustain the child in an out-of-home placement are provided. Time-limited services are provided using concurrent permanency planning to either reunify the family or develop a permanent home for the child. Maryland continues to plan and conduct trainings on the principles and practice of concurrent permanency planning.

3. Recruitment and Retention of Foster/Adoptive Parents

SSA has developed a recruitment plan targeted toward increasing community placements throughout the state.

The plan addresses the need for:

- Resource Families: families who will provide both foster care and adoptive placements for the children placed in their care. Resource Families are

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- licensed both as foster and adoptive parents. This practice is one way of expediting permanency for children who are unlikely to be reunified with their family or who have a plan of adoption.
- Foster Families: families who provide temporary homes that are safe and nurturing places in which to live. Foster parents work with the birth family and the local department of social services to provide the best possible care for children and facilitate the effectuation of the permanency plan (reunification with parents, placement with relatives or adoption).
 - Adoptive Families: families willing to provide a permanent home to children in the State's care. Adoption is the legal proceeding by which a child becomes a member of a family with all the legal rights and privileges to which a child born to the family is entitled.
 - Respite Families: families who do not provide care for a child full time, but who provide care over weekends or on special occasions to relieve the full time resource family. Because "getting a break" from the demands of parenting is important to any parent.

The recruitment and retention plan focuses on Maryland's need to recruit appropriate family settings for all children in the Department's care and custody. In general, the focus is developing resources for children within their communities and on broadening the diversity of resource home options. Developing Recruitment of diverse foster and adoptive parents provides the greatest likelihood that foster children can be matched to a family that can meet their needs rather than placing a child in an "open slot" that may be ill equipped to meet their needs.

It is imperative that our resource parents have a positive and supportive experience. This helps to make them better caregivers for the children placed in their homes. The plan includes retention strategies such as: providing a mentor resource family to prospective families throughout the licensing process and during the time the new resource family receives their first child for placement; development of statewide and local foster parent associations; participation in adoption support groups; provision of respite services; and local and state sponsored recognition activities for foster/adoptive families.

Attached is the complete copy of the State plan for recruitment and retention.

4. State Resource Plan

As an extension of SSA's Recruitment Plan, collaboration with the Governor's Office for Children will implement a State's Resource Plan aimed at ensuring the short- and long-term well-being of children and their families through the identification and provision of quality services in a timely manner and in keeping with best practice models. The plan seeks to inform a process of reshaping

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residential services so that they are responsive to changes in the population, able to serve children and adolescents in their communities, and flexible enough to provide intensive services when needed.

The State Resource Plan sets out to:

- Provide and promote program development, education and training for residential providers, placement agencies and the community;
- Develop or enhance multi-disciplinary, community-based programs and services that span the continuum of care;
- Support programs in under-served areas of the state; and
- Establish and maintain a system of data collection and analysis for the purpose of planning, implementing, and coordinating the development of critical resources.

5. Collaboration with the Foster Care Court Improvement Project

SSA continues its collaboration with Maryland's Foster Care Court Improvement Project (FCCIP) in its efforts to protect the safety and well-being of maltreated children involved in the juvenile court process. The SSA and FCCIP are working together to ensure that Courts and Child Welfare agencies are responsible for adequate judicial, legal, and other social service resources to ensure children reach permanency in a timely manner.

Action Steps, Benchmarks and Accomplishments for these efforts are included in the attached matrix.

WELL-BEING OUTCOMES

The SSA is committed to preserving and enhancing the development of children in its care. To improve the well-being of children and families Maryland consistently focuses on protecting children from abuse and neglect, ensuring permanence and stability, enhancing the capacity of families to provide for the needs of their children and providing appropriate educational and health services.

Goal 3: Families have the enhanced capacity to provide for their children's needs, children and families are active participants in the case planning process, and children receive adequate

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and appropriate services to meet their educational, physical and mental health needs.

Objectives:

- 3.1 By June 30, 2009, in 75% of cases reviewed the needs of children, parents and foster parents will be appropriately met**
- 3.2 By June 30, 2009, in 85% of reviewed children and families will be involved in case planning**
- 3.3 By June 30, 2009, in 90% of the cases reviewed children will receive appropriate services to meet their educational needs**
- 3.4 By June 30, 2009, in 90% of the cases reviewed children will receive appropriate services to meet their physical health needs**
- 3.5 By June 30, 2009, in 75% of the cases reviewed children will receive appropriate services to meet their mental health needs**

To achieve these objectives, SSA is focusing its efforts on:

- Developing and implementing a family-centered practice model
- Partnering with the Maryland Wraparound Initiative
- Collaborating with state and community partners to improve service access
- Conducting service array assessments and developing resource development plans

1. Collaborating with state and community partners to improve service access

The availability and access to critical services are vital to the success of the outcomes for children in child welfare. Collaboration with other child and family serving agencies is essential in the development of the needed resources. SSA will continue its efforts to strengthen collaboration with Maryland State Departments of Education and Health and Mental Hygiene to build a continuum of education and health services for Maryland's children who have to be placed in out-of-home care by developing strategies to increase the availability of and access to critical services that are vital to successful outcomes for the children in Maryland's child welfare system. The SSA will also continue its efforts to engage the stakeholder and advocacy community in the planning and implementation of initiatives.

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2. Service Array Assessment and Resource Development Plan

To meet the needs of children and families, Maryland must have a full continuum of services. DHR is consulting with the National Child Welfare Resource Center for Organizational Improvement and will use their model of service array assessment and resource development planning. This model has been implemented in states including Utah, Wisconsin, Mississippi, and Nebraska.

The service array assessment will examine the full continuum of services necessary to provide sound child welfare practice ranging from prevention to intervention. This assessment will examine the availability of more than 90 key child welfare services are evaluated including; community prevention, investigative and assessment functions home based intervention, out of home services and services for children exiting the child welfare system. The out-of-home services portion of the assessment will specifically address the quality and quantity of child welfare placement resources as well as the supportive services that assist in wrap-around and step-down planning for foster children.

These assessments will be completed in phases, in conjunction with Local Departments of Social Services and key community stakeholders committed to enhancing child welfare services. After all jurisdictions have completed the service array assessment process, data will be compiled to provide a statewide view of the service array in child welfare and to support the development of a statewide resource plan.

Action Steps, Benchmarks and Accomplishments for these efforts are included in the attached matrix.

PROMOTING SAFE AND STABLE FAMILIES

Maryland continues to use the PSSF grant to operate family preservation services, family support services, time-limited family reunification services, and adoption promotion and support services. In FFY 2006, 40% of the PSSF funds were allocated to the local departments on social services to provide time-limited family reunification services and adoption promotion and support services. Forty percent of the funds were also allotted to fund grants for 12 community-based organizations to provide family preservation services and family support services. Ten percent of the funds are set aside for discretionary activities and ten percent for administrative costs.

The 24 local departments of social services offer time limited family reunification services. Each local has designed the services to match the needs of the

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population served in its jurisdiction; however all the services are aimed at reunifying the family. The types of services provided include:

- Individual, group and family counseling;
- Inpatient, residential, or outpatient substance abuse treatment services;
- Mental health services;
- Assistance to address domestic violence;
- Temporary child care and therapeutic services for families, including crisis nurseries;
- Transportation; and
- Visitation centers

Adoption Promotion and Support Services

The 24 local departments of social services offer adoption promotion and support services to improve and encourage more adoptions from the foster care population, which promote the best interests of the children. The activities and services are designed to expedite the adoption process and support adoptive families. Services are also provided to adoptive families that allow them to maintain the child in placement. Funds are allocated to the local departments based in their SFY finalized adoptions. The finalized adoptions for 2005 are 723.

The types of services provided include:

- Respite and child care;
- Adoption support groups;
- Adoption recognition and recruitment events;
- Lifebook supplies for adopted children;
- Recruitment through matching events, radio, television, newspapers, journals, mass mailings, adoption calendars and outdoor billboards;
- Picture gallery matching event, child specific ads and video filming of available children;
- Promotional materials for informational meetings;
- Pre-service and in-service training for foster/adoptive families;
- Transportation reimbursement;
- Retention incentives;
- National adoption conference attendance for adoptive families; and
- Materials, equipment and supplies for training.

Family Preservation and Family Support Services

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In FFY 2005, twelve (12) Local Management Boards (LMBs) throughout Maryland operated family preservation or family support programs within their respective communities. They are Baltimore City, Allegany, Caroline, Carroll, Charles, Frederick, Garrett, Harford, Howard, Somerset, Talbot and Worcester Counties. Although the programs differed depending on the needs of each jurisdiction, each program achieved a positive impact on the State's child welfare efforts and were consistent with the mission of DHR and SSA to keep children safe.

Partnerships/Collaborations

The LMBs contract with public and/or private vendors to provide the family support and family preservation services to families in their communities. LMB membership is composed of individuals from education, juvenile justice, health, local government, mental health, social services, and the general public. The unique aspect of LMB membership is its representation of the private sector, which includes representation by parents, advocacy groups, and private providers of children and family services.

These LMB programs are community-based. Many operate out of a non-traditional place where families feel comfortable such as health clinics, schools, churches and community/recreation centers. In addition, many of the LMB programs also provide services to families in their own homes. Many of the LMB programs have become an integral part of the child welfare system in their communities. The local departments of social services in the 12 jurisdictions mentioned above frequently refer clients to the LMB programs for parenting skills, in-home services, services at the local family support center, or the fatherhood programs.

Family preservation and family support services through the LMB programs have been implemented or enhanced in the following locations in Maryland: Western Maryland, Baltimore Metropolitan area, Washington D.C. Metropolitan area, and the Eastern Shore. Each of the jurisdictions awarded PSSF funds have implemented different programs that are based on the needs of their respective communities. Almost half of the LMB programs have been implemented or enhanced in rural areas in Maryland including: Garrett and Allegany Counties in Western Maryland and Talbot, Worcester, Somerset, and Caroline Counties on Maryland's Eastern Shore. Maryland's PIP refers to statewide access to necessary services for children and families and development of an adequate service array for families in need, in rural and small jurisdictions. The LMB programs supported with PSSF funds help to develop an adequate service array in these communities by filling service gaps.

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The remainder of the LMB programs has been implemented or enhanced in Baltimore City and other metropolitan areas in Maryland including; Howard County, Carroll County, Frederick County, Harford County, and Charles County.

In FFY 05, 576 families and 286 individual participants were served by the PSSF programs statewide. The PSSF programs are available to all families who are in need of services, including birth families, foster families, and adoptive families.

As Maryland works toward improving the child welfare system, a workgroup was established to determine how to best utilize the family preservation and family support funds provided by the federal PSSF program. The workgroup has recommended that beginning in FFY 2007, 80% of the PSSF funds be allocated directly to the local departments of social services to operate or oversee family preservation, family support, time-limited reunification, and adoption promotion services.

A request for proposals was sent to Maryland's 24 local departments. Proposals submitted by the local departments will be evaluated by an evaluation team and funding will be offered based on the recommendations of the evaluation team. Consideration will be given to those that have healthy marriages and responsible fatherhood as their focus. The target date for this process to be completed is August 1, 2006.

Executive Initiatives

(Responsible Fatherhood, Healthy Marriages and Healthy Relationships, and Positive Youth Development)

Some PSSF programs in FFY 2005 have had a particular focus on positive youth development, providing services to non-custodial fathers, and building and maintaining healthy relationships.

Positive Youth Development Initiative:

Charles County: The Windows program is a PSSF program that provides daily after-school activities for at-risk 1st - 5th graders attending two local elementary schools. Activities that increase youth leadership and citizenship, cognitive and educational competence, personal and social competence, and health and physical well-being are major components of this program. Activities include; drug abuse prevention, building positive self-concept, group-sharing, arts and crafts, and music opportunities.

Fatherhood Initiatives:

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Baltimore City - The Young Fathers/ Responsible Fathers program has served 70 fathers in FFY 2005. At-risk fathers and mothers participate in a structured six-month program that includes group sessions and individualized meetings with a family advocate. In addition, they also have access to all the services provided by the local family support center. The program makes efforts to provide: mediation services to the fathers in the program and the mothers of their children; relationship building and encouraging marriage as a viable option; and combined male and female support groups for interaction and discussion.

Frederick County- The fatherhood initiative includes a community-based group for fathers and access to services at the local Family Support Center. A 12-week curriculum is offered to fathers, and they are presented with a certificate upon completion of the program. Discussion topics include: parenting roles; conflict resolution; discipline; co-parenting; anger management; and family law.

Although some of the other jurisdictions do not have distinct fatherhood initiatives, listed below are jurisdictions that focus on supporting fathers and involving them in the lives of their children.

Howard County: A facilitator from the MENS program has been participating in the PSSF funded parenting groups for high-risk pregnant teen mothers and fathers-to-be and the high-risk parenting teen mothers and fathers. The facilitator's efforts focus on engaging non-custodial fathers and involving them in the lives of their children. During the first and second quarters of FFY 06, 14 fathers were served. Services included: case management, parenting groups, and outreach services to pregnant and parenting teens. The goal is to engage the non-custodial fathers and get them involved in their children's lives.

Carroll County: A fathers support group is offered to fathers at the family support center.

Healthy Relationships:

Allegheny County: A 12-week parenting course is designed for parents who are court-ordered or recommended by a community agency. Family-relations and co-parenting are discussed in this course.

Frederick County: Both male and female support groups focus on building healthy relationships. A joint female/male workshop is also offered and meets twice per quarter to discuss relationship and parenting issues.

Harford County: A weekly support group is offered, and part of the curriculum focuses on building healthy relationships.

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Accomplishments

As the LMBs have implemented different programs in their respective communities, some of their outcomes and indicators differ. A reduction in out-of-home placements and a reduction in CPS indicated or unsubstantiated findings of the participants of the PSSF programs are outcomes that many LMBs are measuring. Though the outcomes, indicators, and strategies may differ, the grantees family support and family preservation programs must achieve positive child welfare outcomes consistent with the Maryland CFSP.

The bullets listed below are aggregate findings from FFY 05 across the sites that receive PSSF funds.

Positive outcomes demonstrated across the 12 jurisdictions receiving PSSF funds include:

- Improved parenting skills
- Improved family functioning
- Increased knowledge of infant and child development
- Increased immunization rates
- Improved child well-being and functioning

The following bullets highlight results from individual PSSF programs:

- Harford County
 - Of the 25 families who were discharged from the Safe Start program from October 2005 – March 2006, only 2 families had a child removed from the home
 - Of the 45 families discharged from the program during FFY 05, 94% (42) were able to maintain the child/children in the home
 - 2 new child protective services (CPS) investigations were initiated on the 25 families who were discharged from the Safe Start program in from October 2005 – March 2006
 - 6 of the 45 families (13%) discharged during FFY 05 had a new CPS investigation initiated during the reporting period
- Allegany County
 - In FFY 05, 11 out of 102 families who participated in the H.O.P.E. program had a child removed from the home after enrolling in the program
 - 8 families became involved with CPS after being enrolled in the program.
- Garrett County

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- Out of 16 families served in FFY 2005, there were no families who had a child removed from the home while being enrolled in the PSSF service
- In the first two quarters of FFY 2006, none of the 9 families who have been served had a child removed from their homes
- In FFY 2005, there was 1 family among 16 who required CPS involvement while participating in the program.

- Howard County
 - 63 high-risk teens participated in the prenatal and parenting groups through the PSSF program, and none of their babies (44) were placed in an out-of-home placement during the first two quarters of FFY 2006
 - Out of the 63 high-risk teens who participated in the prenatal and parenting groups, there were no reports of abuse and/or neglect during the first two quarters of FFY 2006
 - 97 teens participated in the groups in FFY 2005 and none of their babies (60) were placed in an out-of-home placement
 - In FFY 2005, out of the 97 teens who participated, there were no reports of abuse and/or neglect

- Charles County
 - In FFY 2005, of the 44 families served by the teen parent home visiting program none had a child removed from their home or an indicated report of abuse or neglect during a family's participation in the program.

- Somerset County
 - 97.2% of families (73 in total) did not have an out-of-home placement while receiving services from the Healthy Families, Lower Shore program (This data is from SFY 2005).

- Worcester County
 - In FFY 2005, 82% of the cases (11) had no out-of-home placements within 12 months of case closures and the same percentage had no indicated CPS finding.
 - Of the 23 families who were served during FFY 2005, none of the families had an indicated abuse or neglect finding during their participation in the service.

- Caroline County
 - In FFY 2005, over 97% (34 in total) of the cases that had been closed for 18 months had no out-of-home placements.

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- As of October 2006, 34 cases have been closed for the 18 months with 1 report of an indicated/unsubstantiated finding; 70 cases have been closed for 12 months with no reports of an indicated/unsubstantiated finding; and 41 cases have been closed for 6 months with no reports of an indicated/unsubstantiated finding.
- Talbot County
 - Over 95% of the families analyzed (448) did not have any CPS involvement within 18 months of admission to the programs.

INDIAN CHILD WELFARE ACT

The state of Maryland does not have any federally or State recognized tribes. However, there are nine (9) known tribes statewide. These tribes are the Lumbee, Piscataway, Accohanock, Assateque Peoples, Douge Indians, Nanticoke Tribe, Pocomoke Indian Nation, Shawnee Indians, and the Susquehannock. The SSA has been in contact with six organizations that represent these tribes. The Baltimore American Indian Center has agreed to be the point of contact for child welfare involvement. The SSA will contact the center when any Indian child and family comes to the attention of a local department for services. The Baltimore American Indian Center and the other organizations will be consulted on service training needs for Native Americans in the in-home and out-of-home programs. These organizations will participate in the foster/adoptive parent recruitment efforts as well as facilitate support groups funded by SSA. Policies and procedures will be drafted and implemented and strategies developed to prevent placements, provide support to extended families and to recruit Native American foster parent resources. An overall goal is to create partnerships with tribal leaders for successful service delivery while complying with the Indian Child Welfare Act.

ADOPTION PROGRAM

The Adoption Program in Maryland is committed to assisting local departments of social services and other partnering adoption agencies in finding "Forever Families" for foster children in the State. Adoption services include study and evaluation of children and their needs; adoptive family recruitment, training and approval; child placement; and post-adoption support. The adoption program includes initiatives such as dual approval of resource homes; open adoption when it is in the child's best interest; statewide recruitment of resource homes; the Maryland Voluntary Adoption Registry; the Adoption Search, Contact and Reunion Services (ASCRS) Program; the Maryland Adoption Resource Exchange (MARE) Program; One Church, One Child (OCOC) Recruitment

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Program; adoption support groups; subsidized adoption; non-recurring adoption expense reimbursement; the Interstate Compact on Adoption and Medical Assistance (ICAMA) and the Interstate Compact on the Placement of Children (ICPC). Maryland's child welfare services continue to emphasize concurrent permanency planning and dual approval of resource homes to increase the number and timeliness of adoptions of children in out of home placements.

As of December 2005, Maryland local departments of social services had 641 children legally free with a goal of adoption. Approximately 200 of these children do not currently have an identified adoptive resource. These children are registered with the Maryland Adoption Resource Exchange (MARE) for child specific recruitment. MARE is a vehicle where children who are not legally free can be matched with families from the entire state (public and / or private agency families) that have been approved as adoptive parents. Legally free children are registered in MARE and the AdoptUSKids national adoption exchange database when there is no Maryland family that matches the child.

Faith-Based Recruitment

One Church, One Child Program

One Church, One Child (OCOC) is a national adoption recruitment model through which the religious leadership of places of worship partner with government agencies to promote the adoption of children in the custody of the State. Since 1988, OCOC in Maryland has served as a component to the Maryland's adoption program.

Maryland continues to create opportunities through collaborations with the faith-based community by the issuance of requests for proposals. As a result, the faith-based community has responded in two unique ways: to serve as the community arm for adoption recruitment or to operate an adoption support group in their place of worship. Both strategies have proven successful in promoting the continuous need for resource families within the faith community. As a result of utilizing these strategies, families who have eagerly accepted the role and responsibility of parenting mostly older and most often traumatized children have been empowered and strengthened. The Board of Directors and the support groups serve as a bridge to disseminate resource information and provide emotional support. During 2005, the following accomplishments were made through collaborative efforts with the faith-based community.

Accomplishments:

- Hosted Annual Conference-November, 2005

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- Developed Regional Satellites in Anne Arundel and Prince George's Counties
- Received \$25,000.00 grant from NATIONAL NETWORK FOR ADOPTION AFFILIATES PROGRAM (NNAAP) for Capacity Building
- Relocated to new location due to renovations at former location
- Held Strategic Planning Session in December, 2005
- Initiated development for Media Campaign
- Continues to develop and maintain a Statewide Directory of Places of Worship that partner with the Department to recruit and support resource families
- Provides training and support to Coordinators from "Committed Places of Worship"

One Church, One Child Adoption Support Groups provide a venue for current and prospective adoptive families before, during and after the adoption is finalized.

Accomplishments:

- Eight support groups in five Maryland jurisdictions: Baltimore City, Baltimore, Prince George's, Montgomery, and Wicomico Counties
- In November 2005, each celebrated their fifth year of service; celebrations included an Academy Awards Celebrations of 28 Families, a regional summit, acknowledgements during worship services, a family outing to the Reginald F. Lewis Museum, and an awards ceremony which included a guest speaker
- Provide a warm-line for telephone inquiries
- Partnered with adoption organization to produce a Public Service Announcement
- Sponsored families and/or attended the North American Council on Adoptable Children (NACAC) Annual Conference
- Participating group members are inviting others to participate
- Buddy system among participants
- Several families have decided to re-apply to adopt other children
- Attend quarterly meetings at DHR Central for networking and resource sharing
- Finalized adoptions highlight: AA male age, 15 years
- Increased efforts for sustainability; to learn and seek other funding sources:
 1. Applied and awarded AdoptUSKids Mini Grants
 2. Applied and awarded National Network of Adoption Affiliates Programs (NNAAP) Grant

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3. Recipient and participated in NACAC Parent Leadership Summit
- Collaborations with Local Departments of Social Services:
 1. Hosted an adoption matching event
 2. Speaker for LDSS training for prospective families
 3. Invited to speak before the Baltimore City Council
 4. Hosted a Christmas Party for waiting children
 5. Developed recruitment video on waiting children
 6. Sponsored annual Adoption Roundtable
 - Networking efforts among fellow groups and the Board of Directors' staff
 1. Collaborated and served on planning committee for One Church, One Child of Maryland, Inc. Annual Conference
 2. Networking occurred with fellow support groups on mutual interests such as November adoption celebrations and matching events
 3. Hosted a Parent Leadership sponsored by NACAC
 4. Invited to conduct workshop on Developing an Adoption Support Group

The State of Maryland continues to provide non-recurring adoption reimbursement for those families adopting special needs children from other countries through a licensed child placement agency or independently, when the child's special needs can be established. This reimbursement is a one-time-only lump sum payment of up to \$2000 per child.

Maryland encourages cross-county activities that promote placement of children across county lines. These activities include matching parties or joint recruitment activities done by the local departments in Maryland and the District of Columbia. In July 2005, the Department in partnership with the Greater Severna Park Rotary Club hosted the 2nd Baltimore Metro Area Adoption Awareness Event. This matching event brought together approved adoptive families and waiting foster children in an effort to secure "Forever Families". Due to the success of last year's event, the Rotary Club has again agreed to partner with the Department for another event scheduled for July '06 in addition to taking the event to other parts of the state utilizing other Rotary Clubs.

Communication via monthly meetings and quarterly reports between the District of Columbia and Maryland continues to decrease the barriers to placement of children from the District of Columbia into this State. Maryland continues to

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ensure that the policies and regulations of the Interstate Compact on the Placement of Children (ICPC) are followed for children placed in the State from other states. The staff of the ICPC office is committed to moving cases as swiftly and efficiently as possible. They also provide technical assistance regarding ICPC regulations to the local departments of social services and the private adoption agencies.

Private Adoption Agency Partnerships

The Department is in the process of reviewing proposals from Maryland licensed child placement agencies to conduct home studies, training, matching, and placement services for prospective resource homes already recruited by local departments of social services or the Social Services Administration (SSA) leading to their approval or denial as a placement site for foster and adoptive children. SSA intends to award multiple contracts to licensed adoption agencies in Maryland to relieve the backlog of prospective resource home studies. The population to be served consists of families and individuals who have responded to a statewide campaign to recruit prospective foster and adoptive resource homes.

Training

In January 2005, Adoption Services sponsored training for local departments and private adoption agency staff. Topics included: preparation of social summaries; Multi-Ethnic Placement Act/Inter-Ethnic Adoption Provisions (MEPA/IEP) and use of the AdoptUSKids website. Trainers from the National Resource Centers for special needs adoptions conducted that training.

Adoption Search, Contact and Reunion Services

Adoption Search, Contact and Reunion Services Maryland's adoption search program. The Mutual Consent Voluntary Adoption Registry (MCVAR) and Search, Contact, and Reunion Services are the two service units for post adoption search and reunion. Legislation for search services took effect October 1, 1999. The original law allowed birth parents and adoptees (age 21 and older) to search for one another through the use of a Confidential Intermediary. In 2005, the Adoption Search Program expanded to allow siblings to search for each other as long as all parties were adopted. To date, close to 1,900 individuals have registered for adoption search services. In the most recent State legislative session, the Adoption Search Law was expanded to allow adopted relatives to search when the birth parent is deceased.

Adoptees and birth family members may obtain information about Adoption Search, Contact and Reunion Services electronically by using the Social

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Services Administration website address at www.dhr.state.md.us/ssa or www.dhr.sailorsite.net/adoption/, or by calling 1-800-39-ADOPT.

Inter-Country Adoptions

The State does not track the number of children who were adopted from other countries and who enter into State custody as a result of disruption of a placement of adoption or the dissolution of an adoption. Once MD CHESSIE (Maryland's SACWIS system) is operational, these numbers will become available. Any child entering care as the result of a disruption or dissolution, whether they were adopted internationally or locally, are provided the same services as all other children entering care.

Adoption Incentive Payments

Adoption incentive payments are not applicable for this report period. Maryland has not received adoption incentive monies since 2001.

KINSHIP CARE

The mission of Kinship Care is to support strengthening and preserving family ties by enhancing the quality of life for caregivers and the children they are rearing. Kinship Care offers services to support the needs of the children and relative caregivers along with providing assistance for crisis circumstances confronting the biological parents who are unable to care for their children. Kinship Care emphasizes the continuity of family connections that may not be as strong in regular foster care settings while promoting concurrent permanency planning for the children in these kinship care placements.

There are approximately 1,900 children receiving formal kinship care services in the state of Maryland.

The regulations for the new guardianship home study law passed by the Maryland General Assembly in 2005, Senate Bill 746 Children in Need of Assistance Custody and Guardianship are being developed and should be completed by December 2006. A compliance monitoring component will included in the regulations. Local departments of social services have started enacting the requirements of this legislation.

Informational brochures have been revised to include legislative updates and current information for on how both formal and informal kinship caregivers to access services. Large quantities of brochures will be available at local departments of social services, as well as school systems and senior citizen

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agencies by October 2006. The brochures give an overview of Kinship Care Services and to explain Senate Bill 31 (2003) Informal Kinship Care-Consent to Health Care on Behalf of a Child. This will include the Senate Bill 32 (2003) Education-Children in Informal Kinship Care Relationships. All of these brochures should be available to disseminate to the public by October 2006.

DHR/SSA continues to fund the Kinship Care Resource Center at Coppin State University. The Kinship Care Resource Center provides information and referrals, training and support groups for caregivers.

The Kinship Care Resource Center at Coppin State University continues to expand outreach services statewide. An SSA representative attends monthly consultative meetings with the Resource Center to provide technical assistance and monitor the service delivery outcomes. A representative from SSA attends the monthly Kinship Care Multidisciplinary Team meeting to provide technical assistance as well. DHR/SSA is collaborating with the Communities of Care to co-sponsor and fund an educational conference for kinship care providers on June 12, 2006. Representatives from Communities of Care participate on the multidisciplinary team.

DHR/SSA will host a Kinship Care Conference for formal and informal caregivers in September 2006. During this conference, training will be conducted for caregivers and staff to highlight the importance of facilitating visitation with parents and siblings during out-of-home placements. Focus groups will be held to solicit input from the relative caregivers who had not been able to discuss their roles and the challenges in caring for the children of their kin.

The Baltimore American Indian Center has been approached about developing outreach services and facilitating kinship care support groups. Working with the Baltimore American Indian Center will be a requirement in the RFP that will be executed by July 2007.

DHR/SSA funded two support groups for formal and informal caregivers by partnering with two private agencies. Baltimore Pediatric HIV program conducted a group for kin with children who have health issues. The Family Tree conducted a support group that dealt with general needs issues.

The implementation a Team Decision Model project that includes Kinship Care will be completed. The pilot project for Kinship Care would begin in July 2007 in jurisdictions participating in Phase I implementation. This will help facilitate the early identification of relative resources for children.

Supervisors participated in training to enhance skills for using supervisory conferences to mentor and to provide clinical supervision to caseworkers

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delivering formal kinship care services. The Support Supervisory Program at the University of Maryland School of Social Work provided training. A monitoring tool to support the clinical supervision process will be developed to complement the curriculum of the program by March 2007.

In an effort to increase permanency for formal kinship care, focus groups have been convened in various jurisdictions throughout the state. Focus groups have been held in Montgomery and Howard Counties. Baltimore City and Anne Arundel County tentatively scheduled for June 2006. Focus groups will be included on the agenda for the statewide Kinship Care Conference in September 2006 as a way to solicit input from those relative caregivers who were not able to attend any of the other the focus groups.

The NRC FC PP will be consulted to develop strategies to increase permanency for children in formal kinship care programs beginning in October 2006.

Baltimore City was the initial jurisdiction consulted in May 2006 based on their experience managing a Kinship Care Program. Quality assurance evaluations and monitoring will be integrated into the meetings as well. Bi-monthly meetings will be held with the Baltimore City Kinship Care program to assessing the delivery of services beginning in July 2006.

Chafee and ASFA regulations were reviewed in June 2005 to confirm that state policy and the subsequent state plan reflect federal regulations. Youth in Kinship Care programs are eligible to receive funds and services pertaining to Chafee and ASFA regulations.

Baltimore City Department of Social Services has incorporated the use of Chafee funds and independent living activities into the services for age appropriate youth in kinship care living arrangements. Inquiries will be made to other jurisdiction to ensure kinship youth have access to Chafee funds.

A preliminary review of kinship care cases in Baltimore City will be conducted in June 2006. Bi-monthly meetings will be held with the Baltimore City Department of Social Services Kinship Care program to assess the delivery of services beginning in July 2006. This will help to facilitate permanency and well being for children in out-of-home placements.

Subsequent arrangements to will be made to visit Anne Arundel, Prince Georges, Montgomery and Howard Counties by December 2006. These represent the jurisdictions with the largest formal kinship care populations. At least bi-monthly technical assistance meetings will be offered to these jurisdictions beginning in January 2007 to promote permanency and well being for children in out-of-home placements. .

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Based on the needs assessment after initial visits to each jurisdiction by December 2006, a decision will be made about convening joint monthly meeting with Kinship Care representatives. A determination will be made by December 2007. Meetings with Baltimore City, Anne Arundel Prince Georges, Montgomery and Howard Counties will be held as an informal pilot project for considering the delivery of kinship care services throughout the state.

Kinship Care will support the efforts of the Foster Care Recruitment team within the Out-of-Home Placement Unit. This will include exploring respite care options for kinship care providers and their participation in training or caregiver enrichment activities by June 2007.

Preliminary efforts to enhance the relationship with other stakeholders will be initiated beginning in June 2006. These agencies will be invited to participate as representatives on the Multidisciplinary Team for Kinship Care providers and as presenters for the Kinship Care Conference. The Maryland State Department of Education (MSDE) was contacted in May 2006 to coordinate services based on the implementation of the Senate Bill 32 Education-Children in Informal Kinship Care Relationships. This will include agencies such as Maryland State Department of Education (MSDE), Department of Health & Mental Hygiene (DHMH) and Department of Housing & Community Development (HCD), Department of Aging as well as the appropriate counterparts in various jurisdictions.

Within DHR, consideration will be given to linking Kinship Care with Family Investment Program. There is limited access to data for informal kinship care families. Data from the Family Investment Program would provide a mechanism to track informal kinship caregivers and ensure preventative linkages to resources to maintain permanency and reduce placement disruption.

There will be an expansion of the guardianship waiver program to include 300 extra families to promote permanency and ensure that a group of children do not enter foster care and that a group of children leave foster care due to this waiver.

CHAFEE FOSTER CARE INDEPENDENCE PROGRAM

The Independent Living Program continues to provide Independent Living Preparation services to youth in foster care. Presently, there are 11,076 children in out-of-home care in Maryland. In FFY 2005, approximately 4,766 youth ages

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14-21 in various living arrangements are eligible to receive Independent Living Preparation services (Monthly Management Report, February 2005). Out of that figure 3,094 youth were receiving Independent Living services in preparation for their emancipation.

Since FFY 2001, the Aftercare service delivery system has been included in the Independent Living Program. The specific purpose of the John H. Chafee Independent Living Aftercare Program is to continue to offer supportive services for youth and allowing them to continue to meet their established goals for a set period of time. This allows for continued learning and developing while practicing the Independent Living Skills needed for youth ages 18-21, to transition from dependency to independence.

The primary goal of Maryland's Independent Living Program is to assist youth to make a successful transition from Out-of-Home Placement to self-sufficiency. This goal is accomplished through the provision of Independent Living Preparation services to eligible youth 14 to 21 years of age who reside in Out-of-Home placement and youth 18 to 21 who exited out-of-care after their 18th birthday. The major program objectives are summarized below:

- Identify resources and work toward the implementation of vocational or specialized training and assist the youth to obtain supportive resources.
- Continue to refer youth to tutoring services and or programs that offer General Equivalency Diploma (GED) classes to pursue and receive a high school diploma or GED Equivalency.
- Continue to seek opportunities for youth to pursue, secure and maintain gainful employment. This may include assistance with transportation for job searches, employment readiness training, purchase of job-related equipment and uniforms and/or referral to the school-to-work partnerships.
- Continue to seek opportunities to increase and improve training in daily living skills, money management, housing location and maintenance, health hygiene, leisure/recreational activities, developing and maintaining healthy relationships and healthy sexuality, abstinence, substance abuse prevention and/or treatment, nutrition and healthy eating habits, smart shopping, problem solving and decision making.
- Continue to seek opportunities for mentoring relationships for youth.
- Implement creative ways to improve the collaborations, advertisement and distribution of the Educational Training Vouchers and State Tuition Waiver.

Maryland is please to report on the following FY2006 accomplishments and FY2007 planned activities for the Chafee Foster Care Independence Program. To assist youth to transition from dependency to self-sufficiency Maryland has:

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- Expended Chafee funds to provide room and board for youth ages 18-21. For FY 2006 from October 1, 2005 - March 2006, \$214,086 or 32.59% of Chafee funds were expended for room and board rate on housing costs for youth ages 18-21.
- Implemented Life Skills classes at the local level that cover a great variation of topics. According to the local department coordinators, many of the youth demonstrate maturity and in-depth understanding of the materials covered during class.
- Instituted Leadership Development training with members of the State Youth Advisory Board (YAB). Exposure to the training is presenting positive outcomes demonstrated by their willingness to serve on committees, encourage each other to attend meetings and assist by volunteering for other state and local youth related activities.

Planned IL activities for the upcoming year include the following:

- Maryland will explore increased opportunities to conduct regional life skills training for youth provided through contractual arrangements with selected vendors.
- All life skills training classes will be appropriately documented via signed attendance sheets by all in attendance to ensure that Chafee funds for life skills training is being used for that purpose.
- The State's Independent Living Coordinator will explore the implementation of quarterly trainings at the Independent Living Coordinators' meetings. This will provide opportunities to invite skilled trainers who are successful with teaching staff how to implement effective Life Skills Trainings.
- Improve data collection practices to indicate: number of youth who actually receive Life Skills Training; how many youth complete the Ansell-Casey Assessment; how many youth obtain employment, etc.

Over the past fiscal year central and local staff have worked diligently to assist youth in seeking and obtaining education, training, and employment opportunities, as follows:

- Three of the State's YAB members are currently enrolled in college and serve as role models for other youth on the Board. Their presence on the Board encourages other high school youth to attend college, apply for the ETV funds and serve as board officers. Youth verbally inform other youth of the opportunities made available to those interested in post-secondary education.

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- Maryland developed brochures to use as advertisement of the ETV funds.
- Developed and presented a financial aid workshop for the 2005 annual Teen Conference. A financial aid staff person conducted the workshop with the assistance of Maryland's staff person who oversees the ETV program.
- Contact is maintained with Maryland's Higher Education Program staff to ensure that Maryland meets the standard operation procedures.
- Maryland IL staff made initial contact with several school counselors to inquire about the best ways to inform them and the foster youth in the public school systems about available funds for post-secondary education. (This was a suggestion from the YAB). At the point of contact IL staff were informed that it is best to contact them in September 2006. In late April and May they are busy recording grades, communicating with colleges and preparing for high school graduation.
- Maryland IL staff completed the Request for Proposal process to seek another vendor for workforce development services. They will train youth on job readiness skills, prepare them to apply for jobs and assist them with working directly with specific county workforce development programs within their jurisdiction.
- John H. Chafee funds were used over the summer of 2005 to contract through a local department on the Eastern Shore with a workforce development agency to place youth in summer jobs and to supervise their placements.

Upcoming planned activities for FY2007 include:

- Continue to advocate for an improved Workforce Development Program that is able to reach a larger portion of Maryland's youth that is open through the public school system
- Closely Monitor the new vendor once approved for workforce development services and monitor its effectiveness based on the referrals received from the local department staff
- Return to the school counselors in September to seek their direction and support on how to reach the youth and staff statewide to inform them of the services for Maryland's foster care youth
- From the new workforce development services, staff will obtain data on how many youth demonstrated job readiness skills
- In FY 2007 data will be reported on how many youth completed resumes, youth who completed a job application and youth who obtained additional job training skills outside of high school

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During the upcoming year planned IL activities to support post-secondary education and training include:

- Improved data will include how many youth applied for and entered vocational training skills during and after high school.
- Emphasis will be placed on the importance of informing, collecting and maintaining data to report on the number of local department staff who arranged seminars for the youth to receive information on FASA and all other forms of financial aid they are entitled to receive while attending post secondary school.

During the past year Maryland IL staff have encouraged personal and emotional support activities for youth by:

- Seeking opportunities to connect youth with mentors. These efforts have not been as fruitful as anticipated, however it is an effort that may be more successful in the future. Case managers report that a very small percentage of youth in foster care are connected to mentors. In Maryland, there seems to be a greater demand for mentoring services than there are mentoring resources to meet the demand.
- Additional training on APPLA and the need for life long connections is included in the current training that is and will continue to be implemented throughout Maryland for Private Providers, Staff, Foster Parents and the youth.

In the upcoming fiscal year IL staff will:

- Continue efforts to obtain reputable mentoring programs for Maryland's youth. Past efforts have not been as successful as desired.
- IL staff will consult with the youth and other collaborating agencies to explore ways to obtain committed mentors.
- Local staff will be strongly encouraged to work harder to seek those adults connected to the youth who may serve as a mentor.

Maryland has completed the following activities over the past year in support of youth ages 18-21.

- Based on Maryland's financial report from October 1, 2005 to March 31, 2006 \$141,755 was spent on the above-mentioned services for youth ages 18-21.

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- It is anticipated that a substantial increase in funds will be spent on this same age group from April 1, 2006 until the end of the federal fiscal year.
- The IL Coordinators drafted a circular letter to implement consistency and clarity over the types of services youth ages 18-21 are entitled to receive for after care.
- Most local department staff are successful in providing a variety of services for their foster care youth between ages 18 and 21. During FY 2006 all IL staff in the locals were all providing some level of services to this age group.
- All local department staff will now use a standard application process for the youth in need of after care services.
- One local department has a research project in place with attempts to track the youth receiving after care services to measure its effectiveness when the whereabouts of the youth are known

Over the next fiscal year, planned activities for youth ages 18-21 will focus on the following:

- Services shall be administered in a more consistent manner throughout the State with the implementation of the After Care circular letter.
- Central and local staff will continue to explore ways to improve the opportunities to seek more reasonable housing options for youth in care and leaving care
- Improved opportunities will be sought to educate the youth and community at large on the types of services available to enhance the lives of foster youth between the ages of 18-21
- Central and local staff will continue to explore effective advertisement strategies to implement throughout the State for the youth, attorneys, school educators, foster parents and all other essential community members to be informed of the IL Program services that are available

In FY 2006 Maryland increased its efforts to collaborate with other federal and/or state programs serving youth through the following activities.

- Maryland maintains ongoing contact with Foster Club of America to discuss resource materials and services for the annual statewide Teen Conference. If approved by our contract office, Foster Club will facilitate most of the service delivery for the 12th Annual Teen Conference.

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- Maryland continues to seek the advice from the National Resource Center for Youth Development on training practices and best practices as its impacts certain policy for the implementation of the John H. Chafee Program.
- Youth Advisory Board training will be conducted by one of Maryland's Youth Advocacy Groups.
- Ongoing contact takes place with Maryland's private purchase of care providers affiliated with the Maryland Association of Resources for Families and Youth (MARYF)

Maryland has provided considerable levels and types of training to youth, staff and providers over the past year and planned for enhanced training in the upcoming year as follows:

- Ansell-Casey Training was conducted for Independent Living Coordinators in December 2005.
- Independent Living Program Overview training has begun. Some Private Providers were trained at the Independent Living Coalition Meeting on March 31, 2006.
- On April 13, 2006 the Children's Choice staff and foster parents received Independent Living Program Overview Training.
- On April 18, 2006 Baltimore City Department of Social Services Family Services staff received training on the Independent Living Program Services.
- May 24, 2006 Maryland's third largest jurisdiction, Prince George's County received Independent Living Program overview training.
- At the Foster Parent Symposium scheduled for June 3, 2006 in Anne Arundel County the Independent Living Program Overview training will take place.
- As a result of the Request for Proposal to continue Workforce Development Job Readiness Skills training, the Evaluation Team made a recommendation for a vendor to provide the service for Maryland's Youth. Final Approval has not yet been granted.
- June 16, 2006 Youth Advisory Board (YAB) training is scheduled for all members of the existing YAB. The focus of the training is on public speaking skills and how to become effective youth advocates.
- July 14-15, 2006, Maryland will sponsor its 12th Annual Teen Conference with the professional services of Foster club of America.
- Ongoing Program and APPLA training will be scheduled for Private Providers, local department staff and foster parents throughout 2006 – 2007.
- APPLA training is also coinciding with the Program Overview Training.

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- National Resource Center for Youth Development will be contacted to arrange for additional training with the implementation of After Care Services, and the development of Youth Advisory Board in 2007.
- Additional training will be arranged for the implementation of the Ansell-Casey Assessment Tool in order for Maryland to make a complete transition from Daniel Memorial to Ansell-Casey.
- Increased emphasis will be placed on leadership development for the members of the YAB.

Maryland no longer implements the trust fund accounts based on the recommendation of our State's Attorney Office. Youth were often difficult to locate at the point of case closure and the funds often remained in the accounts without being distributed.

In 2005, under the guidance of the National Resource Center on Organizational Improvement, Maryland instituted a local CFSR process beginning with three pilot sites in December 2005. Subsequent to the completion of Maryland's local CFSR pilot site reviews, all ongoing local CFSR reviews will include a youth as a stakeholder to be interviewed, beginning with the Baltimore City review in June 2006. Additionally, youth between the ages of 18-21 will be included in Maryland's State CFSR training in the Fall of 2006 to serve on the State CFSR Review Team.

In the upcoming year Maryland plans strategize with the local departments of social services, the Department of Health and Mental Hygiene and its federal partner to develop a plan to utilize the option to expand Medicaid to provide services to youth ages 18 to 20 years old who have aged out of foster care.

Education and Training Voucher (ETV)

During FY2006, DHR/SSA staff met with representatives from Maryland's State Higher Education division to establish a system to use for the Educational Tuition Voucher (ETV) and State Waiver Program. DHR staff met with the Orphan Foundation to discuss the services they provide in order to establish the most effective use of advertising, distributing, and monitoring the ETV funds. DHR/SSA staff are available to youth to answer questions about ETV and provide guidance on the use and frequency of the funds.

In FY 2005, Maryland has encouraged youth to seek post-secondary education and training through the following activities.

- ETV is a standing agenda item on the State Youth Advisory Board's monthly meeting.

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- At the annual State Teen Conference a workshop was conducted on financial aid and grants available to foster care youth.
- Local departments invite college financial aid staff to their life skills classes to guide the staff and youth through the FASA application process and inform them of the types of financial aid they should apply for to attend school.
- One of the local departments took their youth on the college circuit tour to visit the campus and see the college students as they matriculate on the campus.
- ETV training was provided to the private providers and public resource parents.
- Information on EVT was published in the Maryland Youth Handbook.
- IL Coordinators and fiscal staff were trained by the NRC for Youth Services on ETV.

As a result of these efforts, two hundred three (203) youth received ETV awards in FFY 2005 and one hundred fifty (150) youth have received awards for FY 2006, thus far. The actual federal expenditures claimed for ETV were \$143,187 for FFY 2004 and \$546,876 for FFY 2005. The actual expenditures to be claimed for FFY 2006 is \$780, 00.

CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA)

Maryland improved its safety assessment tool by developing an alternative assessment format to be used specifically when determining safety for children in a group or residential placement setting. Trainings on the use of this new format were conducted throughout the state. Automated forms of these risk assessments, as a part of the new SACWIS program, were also implemented.

A current work group, acting as a sub-group of the PIP, also started working on better clarifying and standardizing the criteria to be met when determining if a Child Protective Services Case is appropriate for closure. The goal is to reduce recidivism by improving the quality and focus of case management services through the use of comprehensive assessment.

A sub-group of Maryland's PIP implementation committee, as a part of the review of Maryland's comprehensive assessment, is looking at incorporating a Family Decision Making Model into standard practice. The work group has begun looking at how such a model could best be adapted and utilized in the state of Maryland.

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The Center for Families – Family Connection Program of the University of Maryland School of Social Work was awarded a grant to provide outreach services to 80 families (240 children) in 2004. This grant was renewed in 2005. The program was expanded from serving children and families of Baltimore's West Side Empowerment Zone, to serving children and families throughout the city of Baltimore. The program has provided outreach; individual, conjoint, family and group counseling; case management; and advocacy services to families through frequent contacts during the service period and through the fostering of relationships of individuals with their communities.

A review of how well mental injury cases are being correctly identified will be conducted. The variation in the number of mental injury cases being conducted between local jurisdictions suggests that there is a lack of consistency in this regard. The review will allow the Department to look at current practice, areas in need of further clarification, and the existence of other barriers beyond the added costs of such an investigation. If warranted, the development of training(s) on how to better utilize and execute this category of investigations will be explored.

Research and discussion about how to improve the quality of representation of children in judicial proceedings was initiated. A preliminary review of how this issue is being handled in other states is underway. Further research and discussion on the issue of child representation in judicial proceedings is planned.

Funds will be used to support the Family Decision Making initiative. As part of Maryland's PIP five implementation sites were selected around the state to begin incorporating of the concepts and provision of a family centered community based comprehensive assessment for child welfare. An introduction to the concept of the Family Decision Making Model is part of the model. Administrators and supervisors from each of the implementation jurisdictions, the central office and a consultant from the National Resource Center on Family Team Decision Making hold monthly roundtables to discuss progress and barriers to successful implementation. The input from these sessions, as well as direct staff contributions to the work group will be incorporated into the development and creation of Maryland's model.

The new procedures for referral of at-risk children to the Infants and Toddlers program as required will be implemented by the local jurisdictions. The trainings that have been developed to assist with this implementation will be conducted.

Local jurisdictions of the Departments of Social Services in Maryland joined with their counterparts at the Department of Education to develop a cross-training format. Both have developed training to educate the other and to facilitate collaboration on the new statewide policies and procedures for referral of children

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birth to three to Infants and Toddlers as stipulated by Part C of the Individuals with Disabilities Education Act (IDEA) and the provisions set forth by CAPTA. This process began with a one-day training attended by representatives from both organizations.

Training of staff by their local departments of social services and local Infants and Toddlers program will be conducted in their respective jurisdictions based on plans jointly submitted.

CAPTA funds are also used to support regionally identified training needs and conferences throughout Maryland.

Maryland will issue a Request for Proposals, in early SFY'07 to renew the highly successful training series "High Risk Assessment and Secondary Trauma Training". This training series includes consultation for casework staff experiencing trauma due to case-related activity.

There are more funds earmarked specifically for the training of investigators in the nationally recognized Finding Words protocol for interviewing children in child maltreatment investigations.

In-Home Services staff continued to make presentations to community organizations and at colleges and universities on child abuse and neglect. These sessions focus on the legal definitions of child physical, sexual and mental injury abuse, neglect and mental injury neglect. In addition, specific training on the reporting of suspected child maltreatment is also conducted.

Multidisciplinary team meetings are used for cases that involve both the child protective and juvenile justice systems, as well as complicated cases needing review by community stakeholders. Maryland continues to provide \$2,000 to each of the 24 local departments of social services to be used for the operation of these multidisciplinary teams. These funds were used for consultation, training of team members, and operational costs.

Each of the three citizen review entities was asked for their annual report which will follow submission of this document as soon as they are received.

Maryland requires criminal record checks for any prospective foster or adoptive parents, and other relatives and non-relatives residing in the household before the parents are approved for placement of a child. When a criminal record check reveals a felony conviction for child abuse or neglect, spousal abuse, another crime against a child (including child pornography), rape, sexual assault, or homicide, final approval of foster or adoptive parent status shall not be granted. In a case of a felony conviction for physical assault, battery, or a drug-related offense that was committed in the past five years, approval could not be granted.

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States can opt out of this provision either through a written notice from the Governor to HHS, or through state law enacted by the state legislature.

Juvenile Justice Transfer

Maryland does not statistically track children under the care of the State child protection system who are transferred into the custody of the State juvenile justice system. In 2005, however, the Nexus initiative was formed in Baltimore City, supported by the Family League of Baltimore and the Child Welfare League of America. This initiative addresses the needs of CINA youths who also have contact with Maryland's Department of Juvenile Services. SSA's Research Manager serves on the Data Collection and Information Management sub-committee for this initiative. As the work of this newly formed project progresses, it is anticipated that data on numbers of children transferred from the care of DHR into the custody of DJS will be explored and documented.

RECRUITMENT AND RETENTION

The Department has developed a statewide recruitment and retention plan (complete plan attached). There has been an intense media campaign which targets Maryland's need for resource homes, foster families, adoptive families and respite families. In FY '05, Maryland local departments of social services approved 744 new families as foster and adoptive placements. These homes are often approved for specific children. Some children already reside in a few of these homes.

The recruitment plan targets foster and adoptive families for:

- Boys of all ages
- Teens of both genders
- Foster teen moms and their babies
- Sibling groups
- Children with substantial medical needs
- Emergency placements
- Respite care for foster and adoptive parents
- Children in the two largest jurisdictions (Baltimore City and Prince George's County)

In addition to recruitment strategies, the plan includes incentives to retain resource homes. The Department has begun to work with all foster and adoptive parents to develop a statewide support network and revitalize the statewide

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adoptive parent support group. Statewide summits were held in order to develop a foster and adoptive parent association. The purpose of holding summits was to provide forums in which foster and adoptive parents can determine needs and design a structure for local and statewide foster and adoptive parent associations. This organization will be an independent organization that will work with the Department to ensure that the State addresses the needs of our many families who provide for the children who need out-of-home placement.

Another incentive that is a part of the State's plan is the cash incentive program for current resource families who refer their friends to become foster/adopt resources. Each time a referred family is approved to foster, adopt or become dually approved; the family who referred them will receive a \$250 cash award.

In June 2005, the Department formulated an outreach campaign targeting foster care recruitment and retention efforts. This campaign was formulated in conjunction with the 24 local departments of services, community partners, and foster and adoptive parents. In January 2006, the first component of the media campaign was launched. This was a Public Service Announcements (PSA) on the statewide cable network featuring Maryland's First Lady. This PSA aired over 3,000 times during a 30 day period. The Department has also established additional outreach which includes print, radio and transit advertising which is supported by a 1-800 number directly responding to all inquires around foster care.

The Department hosted its annual adoption celebration on November 4, 2005 for families who have finalized adoptions in that year. Approximately 400 staff and families attend the celebration that was held at La Fontaine Bleu in Glen Burnie, Maryland. This event recognizes and honors the staff and adoptive families throughout the State of Maryland who make it possible for foster children to have a "Forever Family". The local departments of social services nominate adoptive families as the family of the year from their jurisdiction. Each family receives certificates of appreciation from the Secretary of the Department of Human Resources. Several families receive special recognition for their extraordinary service. The master of ceremonies for last year's event was Stan Saunders of WJZ-TV. Local TV stations and a local newspaper covered the event. Its purpose is to reveal the need for adoptive homes to the audience as it advances the positive aspects of adoption.

On November 4, 2005, the Department hosted for the first time, the Heart Gallery of Maryland. The Social Services Administration's Office of Children and Family Services/Adoption along with other community members sponsored the Heart Gallery of Maryland. This event was held at Villa Julie College. This event was developed to feature Maryland's foster children that are in need of adoptive homes. The children that were featured in the Heart Gallery of Maryland were

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older children, sibling groups, and children with special needs. The Heart Gallery of Maryland is and will continue to be a collaborative effort of regional photographers who donated their time and talent, Court Appointed Special Advocates (CASA) of Baltimore, Inc., The Baltimore City Department of Social Services, The Maryland Department of Human Resources, Villa Julie College, and dedicated volunteer coordinators. Fifty children were featured during this event. The mistress of ceremonies for the event was Patrice Harris of FOX 45 news.

TRAINING AND STAFF DEVELOPMENT

Recognizing the critical need for consistent, standardized, pre-service and in-service training for child welfare professionals, DHR has centralized all of its child welfare training under the Maryland Child Welfare Academy (MCWA). The Department of Human Resources MCWA will be the conduit for all training and development opportunities for new and current child welfare staff. The Academy will also provide training to resource families and members of the community involved in child welfare services and initiatives.

The Academy is in partnership with the University of Maryland School of Social Work and offers pre-service and in-service training for child welfare staff; the Title IV-E Education for Public Welfare Program; the Child Welfare Workforce Initiative; the Supervisory Training; and in-service foster parent training. Also offered under the arm of the Academy is child welfare policy and legislation training; pre-service foster parent training (PRIDE); technology training; and child welfare work study programs.

From July 2005 through March 2006, 242 on-going In-Service Training courses (319 training days) were provided by the University of Maryland, Training Department. There were 4,738 individuals who received training during that period. Courses offered included program specific training such as CPS, Foster Care / Adoption and Alcohol and Other Drugs training tracks; cross-program courses such as Worker Safety, Legal Context of Child Welfare Practices and Drugs of Abuse and Their Effects; and category specific courses such as Assessment Tools, Clinical Practice, Ethics, Interviewing Skills and Court Involvement.

Currently there are 97 IV-E students studying for future employment in public Child Welfare services who will, upon graduation, be offered employment in local departments. Sixty-six MSW students graduated in May 2006. These individuals have completed field placements in local departments of social services, received specialized child welfare coursework, participated in monthly seminars to integrate field and classroom child welfare learning, and have a post-

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graduation DHR child welfare employment commitment. The program prepares BSW and MSW students for social work practice providing family-focused, strengths-based public Child Welfare Services to families and children. Twenty-seven current DHR employees are working to complete the University's MSW Program, with support through the Title IV-E Program.

There are currently 10 DHR supervisors in the MSW program and 20 additional new DHR supervisors who are participating in monthly seminars and receive mentoring by a consultant and Title IV-E faculty. This program will increase the pool of MSW social workers prepared for child welfare supervision roles. Curriculum revisions in the University of Maryland's School of Social Work Field Instruction, Supervision and Management courses are designed to better prepare social work students for leadership and supervisory roles in Maryland's child welfare system.

Program staff in the DHR Central office trained about 1,514 social workers, supervisors, directors of private agencies, and other staff in a variety of areas from July 2005 to March 2006. The individuals trained worked in In-Home Services, Out-of-Home Services, Special Services, and technology arenas.

Supervisors, social workers and kinship caregivers will also receive training in a variety of topics at two conferences that will be held in September 2006 to provide practical workshops replete with strategies and tools to be more effective in their respective areas.

MD CHESSIE

The Maryland Children's Electronic Social Services Information Exchange, MD CHESSIE, is Maryland's version of the Federal Statewide Automated Child Welfare Information System, otherwise known as SACWIS. In FY 2005, the Referral module of CHESSIE was operational in all 24 local departments of social services. The Full Release Module has been fully operational in Harford County since February 2006 and eight (8) eastern shore counties went live June 5, 2006. The entire system will be fully implemented and operational by December 2006.

MD CHESSIE will allow for the easy entry and retrieval of text-based data that identifies and tracks the statuses, demographics, child characteristics, locations, financial information, and goals of children in all program areas of child welfare. Workload Management, Staff Management, Provider Management, Document Management and Interface functionality support this comprehensive child welfare

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tool. Management and Statistical reports as well as on-line reports will be available to child welfare staff through MD CHESSIE.

MD CHESSIE meets the requirements for the Federally mandated Adoption and Foster Care Analysis and Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS). MD CHESSIE has an automated Federal Reporting checklist that workers can use as a guide to ensure that all Federal Reporting data elements are completed. Both private, public placements and children with kinship providers will be entered and monitored in MD CHESSIE. Additionally, placements will be validated monthly by workers, as this action initiates payments to those providers requiring payments.

The system will provide an Ad Hoc reporting capability using the reporting tool, Business Objects. This will allow for the effortless retrieval of reports and statistical summaries pertinent to assessing case and program outcomes. MD CHESSIE will enable DHR to respond to requests for child welfare data; in particular, demographic data from federal agencies, state legislators, the public, the judiciary, advocacy groups, attorneys, and the media through the many reports, assessments, case summaries and history screens contained in the system.

The MD CHESSIE System has been designed, developed and tested and has undergone User Acceptance Testing (UAT) before being implemented. Deloitte Consulting is scheduled to remain with the MD CHESSIE Project through June 2007. The Social Services Administration (SSA) has transferred a policy analyst to the position of project coordinator to begin the process of full management of the system after the Consulting teams departure. Child welfare and management staff persons are apprised of project developments through local and regional briefings, management meetings and sessions held by or for other Maryland Department of Human Resources (DHR) administrations. Information is also disseminated through MD CHESSIE Coordinators for the 24 local departments of social services.

MD CHESSIE will assist caseworkers with providing a continuum of exemplary child welfare services, support management in the determination of costs and outcomes, and facilitate improved electronic communications between child welfare staff Statewide.

The Project Advisory Council (PAC), formerly known as the MD CHESSIE Steering Committee, continues to meet on a monthly basis to ensure that the project remains on track and that management at the central and local levels are kept abreast of developments regarding MD CHESSIE.

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Scheduled Project Phases of the Inclusive MD CHESSIE System - FY 2005 – FY 2007:

Unit Testing – August 2004 – December 2004
System Integration Testing – January 2005- June 2005
User Acceptance Testing – October 2005 – January 2006
Data Conversion – May 2005 – December 2006
Training – September 2005- November 2006
Pilot – September 2005 – November 2006
Statewide Implementation – May 2006 – December 2006
Post Implementation/ Maintenance – January 2007 – June 2007

Some of these phases transpire concurrently. Activities of the Post Implementation /Maintenance phase include but are not limited to: training, maintenance, testing, transition management and the addition of system enhancements sanctioned by the MD CHESSIE Change Control Board. The State may assume full responsibility for Post Implementation/Maintenance tasks upon the departure of the Implementation Contractor.

Accomplishments and Progress:

The Early Release of Referral has been implemented in twenty-four (24) counties, including central office. This initiative allows workers to comprehend how MD CHESSIE functions and allows them to sample the benefits of the system. All who participate in the Early Release of Referral activity will experience more ease-of-use with the all-inclusive system. The Referral Search of the Early Release Version of MD CHESSIE provides information on the numbers, the types of reports and referrals taken within each Local Department. Additionally, every report, referral, and CPS background check in their entirety, can be viewed. The search functionality is one way of assisting management with determining the child welfare needs of citizens, as reports for CPS and referrals for Non- CPS related agency activities are the point of entry for child welfare service delivery. A MD CHESSIE search can also determine what workers are doing and how they can be better assisted with their tasks.

On February 14, 2006, the first child welfare case went online at the Harford County Department of Social Services. Seventy-seven⁷⁷ caseworkers and supervisors use MD CHESSIE to complete their caseworker activities. The local department was provided with daily on-sight support for three (3) months while the staff became more familiar and comfortable with the system. Also, on February 14, 2006 the licensing and monitoring unit along with the contracts unit began to use the system, to track private providers licenses and contracts with the state.

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In March 2006, eight (8) local departments of social services on the eastern shore began the implementation process to prepare for MD CHESSIE. The implementation process includes weekly meeting with each local to discuss planning, conversion and change management. The staff began training in late April. Three (3) other local departments began their implementation meetings in April 2006.

QUALITY ASSURANCE

In response to Maryland's federal CFSR 2005 report, Maryland began a year-long collaborative effort to redesign its quality assurance system. Input from central Department of Human Resources staff, central Social Services Administration staff, local departments of social services administrative and case management level staff, court improvement project staff, state and local citizens review panels and citizens review boards, consumers of services, and the National Resource Center on Organizational Improvement was incorporated into the redesigned Quality Assurance System. The system is designed to build continuous quality improvement at every juncture of service delivery for children and families served by DHR/SSA. The Maryland Child and Family Services Review (MCFSR), an outgrowth of Maryland's federal review findings, has been piloted in three counties prior to being implemented statewide. The primary components of the MCFSR are local self-assessment, local on-site reviews, local Performance Improvement Plans, and state (Social Services Administration-SSA) level compilations of the process. Feedback loops between the local departments of social services (LDSS) and SSA are woven throughout the process. Additionally, stakeholder and customer input are an integral part of the process. The quality assurance cycle is to be repeated, at a minimum of every 3 years, although ongoing specific outcome data will be generated to the locals for quality assurance purposes on at least a quarterly basis.

The LDSS Self Assessment will take place over a six-month time frame prior to the on-site review. The LDSS Director or designee will organize the Self-Assessment team comprised of LDSS staff only. The Director or a designee will present a LDSS Self-Assessment Report to DHR/SSA, and to the on-site review team. The LDSS Self-Assessment Report goes to DHR for review at least 30 days prior to the on-site review.

Components of the LDSS Self-Assessment Report

- Local Demographics (i.e. Poverty Levels, TANF Caseloads, population trends, housing trends etc...)
- Description of LDSS Structure (org. chart plus narrative)

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- Include staff turnover/vacancy rates
- Caseload ratio based on CWLA Standards
- Budgetary Resources
- Assessment of Physical Plant
- Assessment of IT Capacity at local level
- Overview of Child Welfare Population and Outcome data
 - Number of referrals received
 - Number of referrals screened in
 - Number of indicated child abuse/neglect investigations
 - Number of families served by Family Preservation
 - Number of families served in continuing child protective services
 - Number of children in out-of-home placement total and by placement type
 - Number of finalized adoptions
 - Outcome date for six national standards (see example below):

	<u>MD2005</u>	<u>CFSR</u>	<u>Standard</u>
Repeat Maltreatment	7.0%	8.0%	≤ 6.1%
Adoption	18.7%	14.7%	≥ 32.0%
Reentry	8.3%	8.3%	≤8.6%
Reunification	49.9%	49.9%	≥76.2%
Placements	89.6%	94.5%	≥86.7%
FC Maltreatment	N/A	0.52%	≤0.57%

- Description of Stakeholder Partnerships and Services Integration (Courts, County Government, Education, Health Department, Juvenile Justice, etc.)
 - Address timely notification of hearings
- Overview of Services Array
 - Transportation, Substance Abuse, Dental, Physicians, Domestic Violence, Mental Health, etc....
 - Review of Resources (Foster and Adoptive Parent Licensing, Recruitment and Retention
 - An overview of the local Limited English Proficiency System
- Overview of Prevention/Early Intervention/Wraparound Strategies

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- Results of Customer and Stakeholder Surveys
 - Stakeholder focus groups
 - Customer Surveys
- Overview of Q.A. system (as it related to Child Welfare)
- An Overview of the Case Review System for court proceedings
- Compilation of Performance Data/Outcomes from Peer, Supervisory and Citizen's Review Board Case Reviews
- Identification of Native American Children in caseload and compliance measures regarding the Indian Child Welfare Act (ICWA)
- Summary Assessment/Systemic Reform Efforts (identifying strengths and areas needing improvement etc.)

The on-site review consist of reviewing case records and conducting case-related interviews as well as interviewing community stakeholders to determine a local jurisdictions performance in reaching positive child welfare outcomes (safety, permanency and well-being). The on-site team leads will be comprised of SSA staff. The two-person case record review teams will be comprised of SSA staff, local DSS staff (including supervisors from neighboring departments), Citizen Review Board and Panel members, and other community stakeholders. The case record review teams review case records and conduct interviews with the child, family, and service providers related to the case. The on-site team leads will conduct stakeholder interviews, provide secondary quality assurance for all case record review instruments as well as provide on-site case consultation to the case record reviewers.

The LDSS Director and SSA share responsibilities for background work (scheduling, on-site interviews, case record labeling, etc.) All details for the site review are to be completed at least one week prior to the site visit. SSA will have authority for drafting the final report from the on-site review and making final recommendations regarding the LDSS's Performance Improvement Plan (PIP).

Components of the Site Visit

- Three to five days in length depending on size of LDSS
- In-depth case record reviews, which includes interviews with the child, family, case worker, and service providers—6-15 cases
- Cases will be selected randomly from the cases opened during the specified period under review
- On-site stakeholder interviews

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- 2 person review teams (composed of Citizen Review Board, SSA staff, Supervisory staff from another LDSS, and other community stakeholders as needed and appropriate)

SSA will issue a draft final report with recommendations for improvement back to the LDSS. The LDSS will have 30 days to respond to SSA regarding the draft final report to address discrepancies, etc. SSA will review the local feedback on the draft final report, have dialogue with the LDSS, and then issue a final report back to the LDSS. This Final Report is basis for LDSS's individualized Performance Improvement Plan (PIP), which will be due within 60 days of the receipt of the final report from SSA. Subsequent progress reports will be submitted to SSA on a quarterly basis. SSA will conduct a review of the local PIPs quarterly. Progress reports will be shared with SSA executive and program staff to address identified issues, concerns, needs for technical assistance, training, resources, etc.

SSA will compile a final State-wide Self-Assessment comprised of the data elements of the LDSS's Child and Family Services Review for its own Quality Assurance usage and for preparation for the next federal Child and Family Services Review on-site visit based on the below projected schedule from HHS:

3/25/05	PIP approved
3/25/07	End date for PIP Implementation
4/1/07-3/31/08*	Next data period for next CFSR (non-overlapping period)
7/08*	Earliest date for next State-wide Assessment to begin
1/09*	Earliest date of next onsite CFSR (by HHS)

*Projected by HHS

The supervisory/peer case record review instrument will be utilized in supervisory and optional peer reviews at the LDSS level. Additionally, portions of the tool will be utilized in the Citizen's Review Board and Panel case record reviews. The instrument focuses on compliance with federal, state, LJ, and Council on Accreditation requirements as well as the federal outcomes of safety, permanency and well-being.

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Financial and Statistical Information Reporting

Maryland intends to expend twenty percent on each of the following services: family preservation, community-based family support, time-limited family reunification and adoption promotion and support services. Planning and service coordination funds will be spent on items included in the PIP such as training on family centered practice, consultants for mapping resources in regional areas and equipment for team staffing facilitators.

In federal fiscal year (FY) 2004, the State spent the following amount of federal funds in each of the four categories of services:

- Family Preservation - \$1,013,431
- Family Support - \$807,004
- Time-Limited Reunification - \$509,408
- Adoption Promotion - \$862,959

(Total Federal Funds Spent - \$3,417,982)

Maryland stated that a minimum of twenty percent would be spent on each of the four services during FY 2004. Of the total federal funds spent, thirty-two percent was spent on Family Preservation, twenty-five percent was spent on Family Support; sixteen percent was spent on Time-Limited Reunification and twenty-seven percent was spent on Adoption Promotion. Although Maryland did not reach its goal for all of the services, improvement was made over prior years. Unfortunately the local departments did not spend their entire allocations. Continued efforts will be made for improvement with Time-Limited Reunification as we strive to reunite the children with their families in a timely fashion.

In FY 2004, state and local spending on IV-B part 2 activities totaled \$64.5 million. These amounts include services that prevent the risk of abuse, assist families at risk of having a child removed from their home, promote the timely return of a child to his/her home, and if returning home is not an option, provide appropriate placement and permanency. The FY 1992 baseline is \$31.7 million.

The State does not spend Title IV-B, Subpart 1 funds for foster care maintenance payments, adoption assistance payment or child day care related to employment or training for employment.

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The state spent \$2,635,510 in Chafee FY 2004 funds. The amount spent for room and board was \$16,336 or 0.6% percent of the total. To date, the State has spent \$1,568,197 in FY 2005 funds.

The state spent \$546,876 in ETV FY 2004 funds. To date, the State has spent \$306,484 in FY 2005 ETV funds.

**CFS-101, Part I: Annual Budget Request For Title IV-B, Subpart 1 & 2 Funds, CAPTA, Chafee Foster Care Independence Program (CFCIP) and Education and Training Vouchers (ETV):
Fiscal Year 2007, October 1, 2006 through September 30, 2007.**

1. State or ITO: Maryland	2. EIN: 52-6002033
3. Address: Department of Human Resources 311 W. Saratoga Street Baltimore, MD 21201	4. Submission: [X] New [] Revision
5. Estimated Federal title IV-B, Subpart 1 Funds.	\$ 4,411,767
6. Total Estimated Federal title IV-B, Subpart 2 Funds. (This amount should equal the sum of lines a – f.)	\$ 3,998,905
a) Total Family Preservation Services.	\$ 799,780
b) Total Family Support Services.	\$ 799,780
c) Total Time-Limited Family Reunification Services.	\$ 799,780
d) Total Adoption Promotion and Support Services.	\$ 799,780
e) Total for Other Service Related Activities (e.g. planning).	\$ 399,892
f) Total Administration (not to exceed 10% of estimated allotment).	\$ 399,893
7. Re-allotment of Title IV-B, Subpart 2 funds for State and Indian Tribal Organizations	
a) Indicate the amount of the State's/Tribe's allotment that will not be required to carry out the Promoting Safe and Stable Families program. \$ <u> -0- </u>	
b) If additional funds become available to States and ITOs, specify the amount of additional funds the State/Tribes is requesting. \$ <u> -0- </u>	
8. Child Abuse Prevention and Treatment Act (CAPTA) State Grant (no State match required)	
Estimated Amount \$496,543 , plus additional allocation, as available.	
9. Estimated Chafee Foster Care Independence Program (CFCIP) funds.	\$ 2,856,235
10. Estimated Education and Training Voucher (ETV) funds.	\$ 975,653

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11. Re-allotment of CFCIP and ETV Program Funds:

a) Indicate the amount of the State's allotment that will not be required to carry out CFCIP \$ -0-

b) Indicate the amount of the State's allotment that will not be required to carry out ETV \$ -0-

c) If additional funds become available to States, specify the amount of additional funds the State is requesting for CFCIP \$ -0- for ETV program \$ -0-.

12. Certification by State Agency and/or Indian Tribal Organization.

The State agency or Indian Tribe submits the above estimates and request for funds under title IV-B, subpart and/or 2, of the Social Security Act, CAPTA State Grant, CFCIP and ETV programs, and agrees that expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with, and approved by, the ACF Regional Office, for the Fiscal Year ending September 30.

Signature and Title of State/Tribal Agency Official	Signature and Title of Regional Office Official
Christopher J. McCabe, Secretary	
Date	Date