

# Citizens Review Board For Children



ANNUAL REPORT

FISCAL 2016

(July 1<sup>st</sup> 2015 - June 30<sup>th</sup> 2016)

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## **Introduction**

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

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

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

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

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

The local Boards meet at the local Department of Social Services in each Jurisdiction to conduct reviews of children in out-of-home placement. Individual recommendations regarding the permanency, placement, safety and well being are sent to the local Juvenile Courts, the local Department of Social Services and the interested parties involved with the child's care.

The CRBC FY2016 Annual Report contains CRBC's findings from our case reviews, advocacy efforts, CPS panel activities and recommendations for systemic improvements.

On behalf of the State Board of the Maryland Citizens Review Board for Children (CRBC), it's staff and citizen volunteer board members, I am proud and happy to present our Fiscal 2016 Annual report.

Sincerely,

Nettie Anderson-Burrs  
State Board Chair

## **Executive Summary**

During fiscal 2016, the Citizens Review Board for Children reviewed 1358 cases of youth in Out-of-Home placements which represented 19% of the total number of 7,166 children served in the state of Maryland. Reviews are conducted per a work plan developed in coordination with the DHR/SSA with targeted review criteria based on Out-of-Home placement permanency plans. The majority of the cases reviewed (48%) had a permanency plan of Another Planned Permanent Living Arrangement (APPLA).

Health and Education Findings for statewide reviews include:

- The local boards found that the children/youth had a comprehensive health and mental health assessment in 90% of the cases reviewed.
- The local boards found that in only 48% of the total cases reviewed the health needs of the children/youth had been met.
- Approximately 37% children/youth had been prescribed psychotropic medications.
- The local boards agreed that 83% of the children/youth were prepared to meet their educational goals.

Demographic findings for statewide reviews include:

- 64% of the children/youth were African American.
- 33% of the children/youth were Caucasian.
- 50% of the children/youth were male.
- 50% of the children/youth were female.

CRBC conducted 382 Reunification reviews. Findings include:

- 84 cases had a plan of reunification for 3 or more years.
- The local boards agreed with the placement plan in 97% of cases reviewed.
- The local boards agreed that appropriate services were being offered to children/youth in 97% of the cases reviewed. Appropriate services were being offered to birth families in 68% of cases and to the foster and kin providers in 43% of cases reviewed.
- The local boards found that service agreements were signed in 50% of cases reviewed.
- The Local boards also found that local departments made efforts to involve the family in case planning in 94% of cases.

CRBC conducted 277 Adoption reviews. Findings include:

- 38 cases had a plan of adoption for 3 or more years.
- The local boards agreed with the placement plan in 99% of cases reviewed.
- The local boards identified the following barriers preventing the adoption process or preventing progress in the children/youth's case:

- Pre-Adoptive Resources not identified for the child
- Incomplete submission of the interstate compact packets and,
- Home study not approved.

CRBC conducted 599 APPLA reviews. Findings include:

- 191 cases had a plan of APPLA for 3 or more years.
- The Local boards agreed with the permanency plan of APPLA in 579 out of the 599 cases statewide. 434 of the cases reviewed with a permanency plan of APPLA were youth between the ages of 18-20.
- Barriers identified that could preclude the youth in care from being adopted, reunified with their families or moving into an independent living situation included failure of youth to consent to adoption and lack of family resources.
- 72% of youth had received the skills necessary to begin to live on their own. Across all jurisdictions, the reviewers agreed that 76% (476) of the time that the youth were being appropriately prepared.
- Only 20% of youth transitioning out of care had housing specified.
- A permanent connection is an identified person that a youth can rely on for assistance with support, advice and guidance as they deal with the day to day life that adulthood can bring about on a regular basis. The local boards agreed in 72% of cases that a permanent connection had been identified for the youth by the local department. The boards also agreed that the identified permanent connection was appropriate in all of those cases.

### Concurrent Planning

Concurrent planning is an approach that seeks to eliminate delays in attaining permanent families for children in foster care. In concurrent planning, an alternative permanency plan or goal is pursued at the same time rather than being pursued after reunification has been ruled out. The Adoption and Safe Families Act (ASFA) of 1997 provided for legal sanctioning of concurrent planning in states by requiring that agencies make reasonable efforts to find permanent families for children in foster care should reunification fail and stating that efforts could be made concurrently with reunification attempts. At least 21 states have linked concurrent planning to positive results including reduced time to permanency and establishing appropriate permanency goals, enhanced reunification or adoption efforts by engaging parents and reduced time to adoption finalization over the course of two review cycles of the Federal Child and Family Services Review (Child Welfare Information Gateway, Issue Brief 2012, Children's Bureau/ACYF). DHR/SSA Policy Directive#13-2, dated October 12, 2012 was developed as a result of Maryland reviewing its case planning policy, utilizing best practices and including concurrent planning as part of Maryland's performance improvement plan.

## Concurrent planning findings

- 69 out of 377 cases with a permanency plan of reunification had a concurrent permanency plan.
- Only 180 out of 1339 eligible cases had a concurrent permanency plan.

## Ready by 21(Transitioning Youth)

### Age of Youth

- 65% (878) of the children/youth reviewed were 14 years of age and older, 133 were 17 years old, 133 were 18, 84 were 19 and 267 were 20 years old.

### Housing

- The local boards found that (85%) 375 out of the 439 youth transitioning out of care had a housing plan specified.

### Independent Living

- The local boards found that (75%) 605 out of the 812 eligible youths were receiving appropriate services to prepare for independent living.

### Employment

- The local boards found that (70%) 567 out of the 806 eligible youths were being appropriately prepared to meet employment goals.

## CRBC recommendations for DHR/SSA:

- Increase efforts to ensure that health and mental health needs of children and youth are met.
- Increase the number of relative/kin placement and permanency resources.
- Explore adoption counseling for children and youth that have not consented to adoption.
- Ensure that concurrent planning occurs to increase the likelihood of establishing an appropriate permanency plan or goal, and achieve permanency without undue delay.
- Explore other permanency options at least every 6 months for children and youth with a permanency plan of APPLA.
- Ensure that a viable housing plan is identified for older youth transitioning out of care at least 6 months prior to anticipated date of discharge or youth's 21<sup>st</sup> birthday.
- Ensure that older youth transitioning out of care are engaged in opportunities to use independent living skills obtained.

Sincerely,  
Denise E. Wheeler  
CRBC Administrator

## **Acknowledgements**

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

- ★ CRBC Governor Appointed Volunteers
- ★ The Department of Human Resources (DHR)
- ★ The Social Services Administration (SSA)
- ★ The Local Departments of Social Services (LDSS) and (DHHS) Montgomery County
- ★ The Coalition to Protect Maryland's Children(CPMC)
- ★ The State Council on Child Abuse and Neglect (SCCAN)
- ★ The State Child Fatality Review Team (SCFRT)
- ★ The Local Juvenile Courts of Maryland
- ★ All community partners

## **Program Description**

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

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

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

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

The Citizens Review Board for Children consists of Governor appointed volunteers from state and local boards. There are currently 36 local review boards representing 23 counties and Baltimore City. There are 143 appointed volunteers serving on local boards. CRBC reviews cases of children in out-of-home placement, monitors child welfare programs and makes recommendations for system improvements.

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

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

## **Mission Statement**

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

## **Vision Statement**

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

## **Goals**

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

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

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

## **Discrimination Statement**

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

## **Confidentiality**

CRBC local board members are bound by strict confidentiality requirements. Under Article 88A, § 6, all records concerning out-of-home care are confidential and unauthorized disclosure is a criminal offense subject to a fine not exceeding \$500 or imprisonment not exceeding 90 days, or both. Each local board member shall be presented with the statutory language on

confidentiality, including the penalty for breach thereof, and sign a confidentiality statement prior to having access to any confidential information.

### **CRBC Legislative Activities**

During the 2016 Legislative Session CRBC continued its legislative child welfare advocacy efforts by being an active organizational member of the Coalition to Protect Maryland's Children (CPMC). The State Board's Children's Legislative Advocacy Committee (CLAC) weighs in on legislation and makes recommendations to the State Board. CRBC supported 17 bills (written/oral testimony) and CPMC supported 24 bills with CRBC agreement.

## **Out-of-Home Placement Reviews**

### **Targeted Review Criteria**

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

#### **Reunification:**

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

#### **Adoption:**

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

#### **Another Planned Permanent Living Arrangement (APPLA):**

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

### Older Youth Aging Out

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

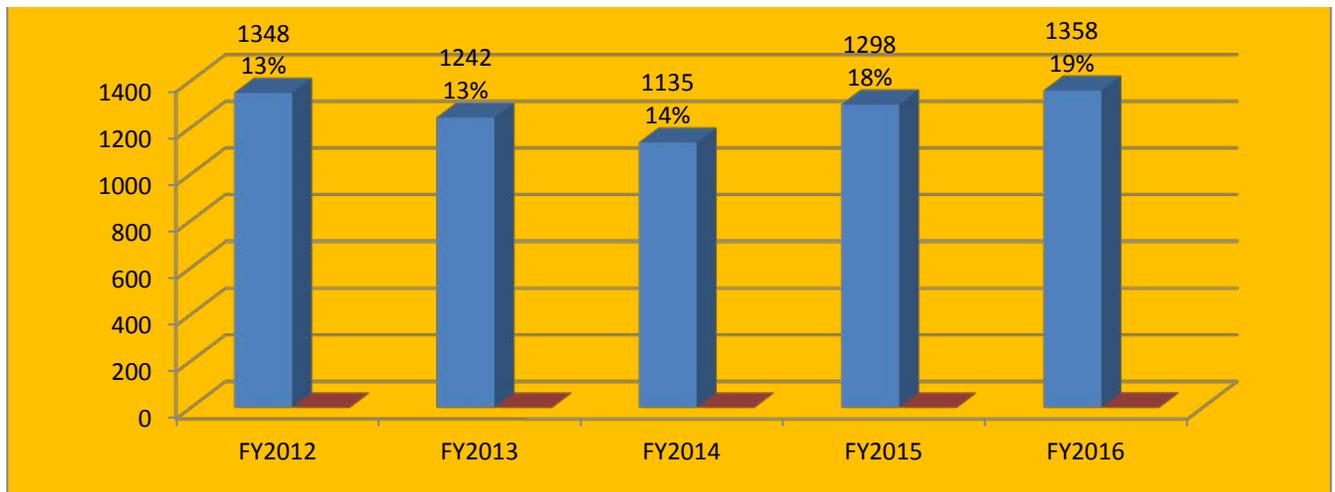
### Re-Review Cases:

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

## Review Findings

For FY2016 CRBC reviewed 1358 cases of children in Foster Care Out-of-Home placements, which represented 19% of the 7,166 children served by the state. The total number of children served decreased from (10,414) in FY2012, to (7,116) in FY2016; however, the percentage of CRBC reviews consistently increased from FY2012 (13%) to FY2016 (19%). CRBC also re-reviewed cases designated by local boards during the 4<sup>th</sup> quarter of the fiscal year to assess if progress had been made or board recommendations had been implemented by the local departments.

### **Out-of-Home Case Review Comparisons 5 year span**

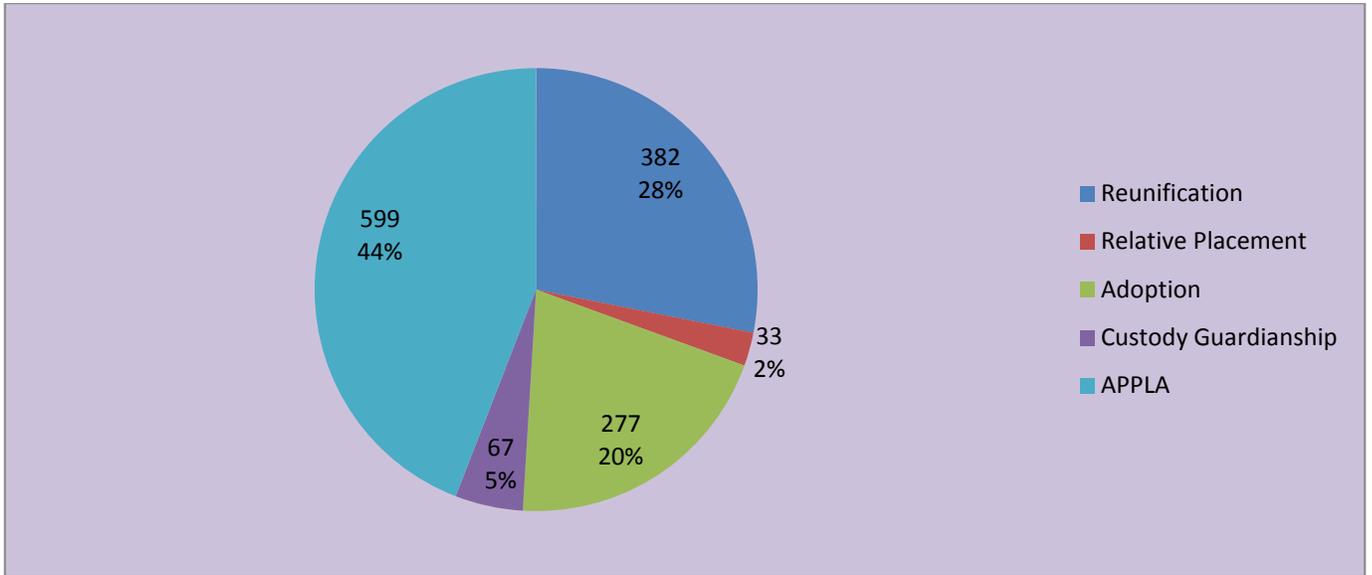


(number of reviews and percentage of children served by fiscal year)

CRBC reviewed cases of youth in out-of-home placements that met the identified permanency plan criteria of reunification, adoption and APPLA. CRBC also reviewed cases in out-of-home placements with permanency plans of relative placements for custody and guardianship or adoption, and permanency plans of guardianship to a non relative.

The majority of the cases reviewed had a permanency plan of APPLA (44%). In addition, CRBC also reviews advocacy cases where the juvenile courts had determined that reasonable efforts were not made, cases requested by interested parties, and cases requested by the local boards.

## Percentages by Permanency Plan



## Gender Totals (1358)

Male	Female
681 (50.9%)	677 (49.1%)

### Male (681):

Reunification	Relative Placement	Adoption	Guardianship	APPLA
200 (29%)	18 (3%)	154 (23%)	33 (5%)	276 (41%)

### Female (677):

Reunification	Relative Placement	Adoption	Guardianship	APPLA
186 (27%)	15 (2%)	123 (18%)	34 (5%)	319 (47%)

## Ethnicity Overall (1358)

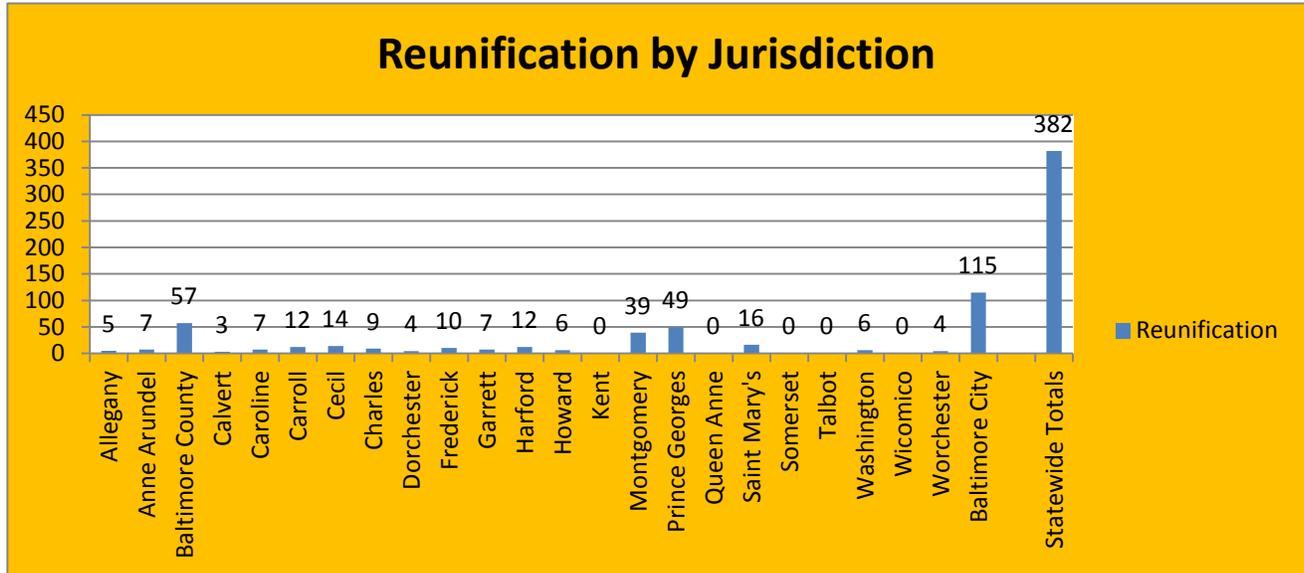
African American	Caucasian	Asian	Native American	Other
872 (64%)	445 (33%)	8 (< 1%)	2 (< 1%)	31 (<1%)

## Case Reviews by Jurisdiction

Jurn #	County	Reunification	Relative Placement	Adoption	Custody Guardianship	APPLA	TOTAL
01	Allegany	5	0	5	2	2	14
02	Anne Arundel	7	0	25	7	23	62
03	Baltimore County	57	0	24	4	69	154
04	Calvert	3	0	7	0	8	18
05	Caroline	7	0	0	0	1	8
06	Carroll	12	0	0	0	2	14
07	Cecil	14	2	11	0	7	34
08	Charles	9	0	4	0	12	25
09	Dorchester	4	0	1	1	0	6
10	Frederick	10	0	15	3	11	39
11	Garrett	7	0	0	0	0	7
12	Harford	12	1	24	3	28	68
13	Howard	6	0	0	0	10	16
14	Kent	0	0	0	0	0	0
15	Montgomery	39	4	19	2	76	140
16	Prince Georges	49	0	10	12	66	137
17	Queen Anne	0	0	0	0	0	0
18	Saint Mary's	16	0	3	5	3	27
19	Somerset	0	0	4	0	2	6
20	Talbot	0	0	7	0	2	9
21	Washington	6	1	8	1	28	44
22	Wicomico	0	1	6	1	7	15
23	Worchester	4	0	4	0	2	10
49	Baltimore City	115	24	100	26	240	505
24	Statewide Totals	382	33	277	67	599	1358
24	Percentages	28%	2%	20%	5%	44%	100%

## Reunification Case Reviews

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



### Permanency

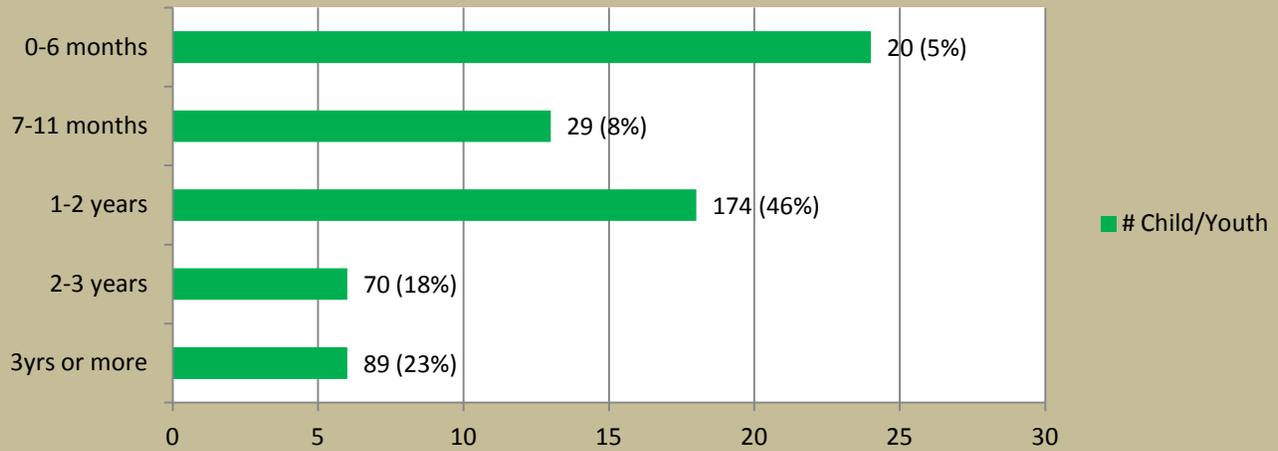
The local boards agreed with the permanency plan of reunification in 76% of the 382 cases reviewed and recommended the following alternate plans for the remaining cases:

- Appla: 8%
- Relative Placement: 5%
- Adoption: 6%
- Custody/Guardianship: 5%

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

Of the 382 Reunification cases reviewed the local boards found that the length of time the child/youth had a plan of Reunification were as follows:

## Length of Time : Reunification



### Placement

The local boards agreed with the departments' placement plan in 364 out of the 382 cases reviewed. The majority of placements were in Private Treatment Foster Care (25%), Treatment Foster Care (14%), Residential Treatment Centers (12%) and Therapeutic Group Homes (11%).

Number of Cases	Placement
10	Formal Kinship Care
3	Pre-Finalized Adoption
36	Regular Foster Care
18	Restricted (Relative) Foster Care
52	Treatment Foster Care
95	Treatment Foster Care (Private)
1	Alternative Living Unit
5	Residential Group Home
5	Teen Mother Program
41	Therapeutic Group Home
5	Independent Residential Living Program
45	Residential Treatment Center
6	Relative
1	Own Dwelling
59	Other

## **Placement Stability**

The local boards found that in 67% of the cases reviewed the child/youth were placed in settings that were in close proximity to their communities which allowed for the continuity of services.

The board also found that in 49% of the cases reviewed there was a change in placement within the 12 months prior to the review for the child/youth in regards to level of care.

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

- 41% had the same level of care
- 29% were in less restrictive placements
- 24% were in more restrictive placements

## **Services**

The local boards looked at services offered to the child/youth, the birth family and the foster/kin family in the following areas:

- Housing
- Medical
- Mental health
- Education
- Employment
- Special needs
- Substance abuse treatment
- Visitation with family or referrals to needed resources

The boards found that appropriate services were offered to the child/youth in 96% of the cases reviewed, the birth family in 68% of the cases, and the foster/kin family in 43% of the cases.

## **Health/Mental Health**

The local boards found that in 94% of the cases reviewed the child/youth received comprehensive health and mental health assessments. Medical records were found in the cases records in 67% of the cases and the child/youth had their health and mental health needs met by the local departments in 52% of the cases. In 27% of the cases the child/youth had developmental or special needs. Psychotropic medication was prescribed to address mental health issues in 48% of the cases, and in 10% of the cases reviewed the child/youth had substance abuse issues.

### **Education and Employment**

The local boards found that in 96% of the cases reviewed the child/youth were being prepared to meet educational goals. In 72% of the cases the child/youth had been appropriately prepared to meet employment goals, and 23 out of 247 eligible youth were participating in paid or unpaid work experience.

### **Risk and Safety**

The local boards found that 3% of the cases reviewed had risk indicators and safety protocols were followed.

### **Case Planning**

Service Agreements: The local boards found that in 50% of the cases reviewed a signed service agreement was in place.

Family Involvement: The local boards found that in 94% of the cases reviewed an effort was made to include the family in the case planning process.

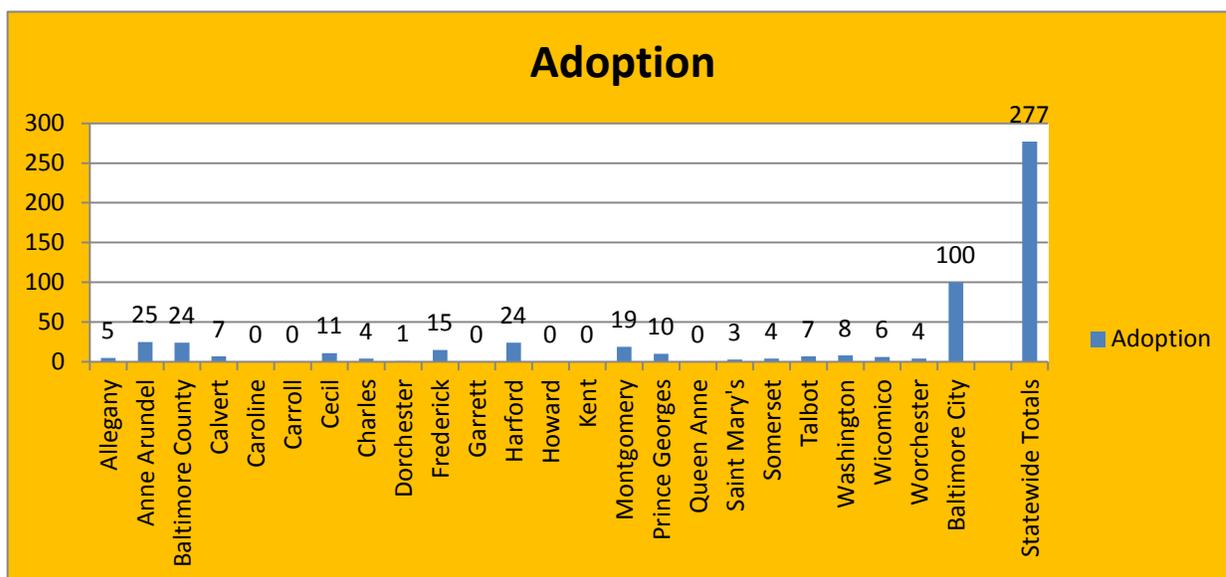
CASA (Court Appointed Special Advocate): The local boards found that in 24% of the cases reviewed the child/youth had a court appointed special advocate.

### **Frequency of Caseworker Visits**

Frequency	Cases
Once a week	2
More than once a week	2
Less than once a week, but at least twice a month	14
Less than twice a month, but at least once a month	349
Less than once a month	12
Quarterly	2
Never	1

## Adoption Case Reviews

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



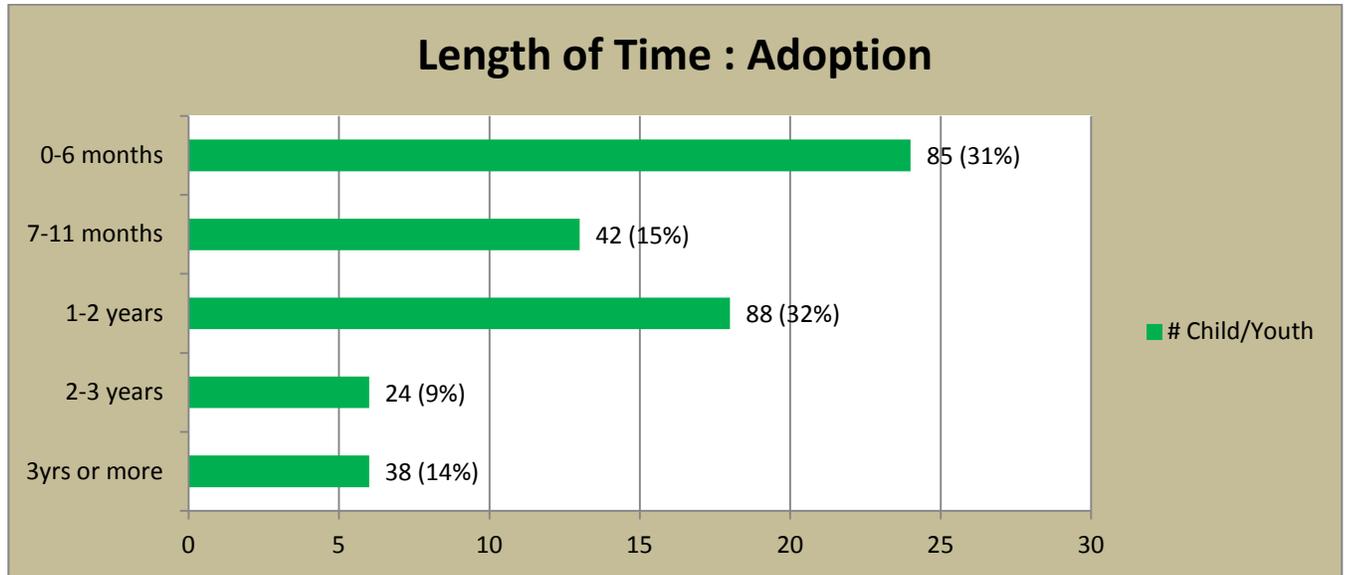
### Permanency

The local boards agreed with the permanency plan of adoption in 91% of the 277 cases reviewed and recommended the following alternate plans for the remaining cases:

- Appa: 6%
- Relative Placement: 1%
- Renification: 1%
- Custody/Guardianship: 1%

### Length of time Child/Youth had a plan of Adoption

Of the 277 Adoption cases reviewed the local boards found that the length of time the child/youth had a plan of Adoption were as follows:



### **Placement**

The local boards agreed with the departments' placement plan in 99% of the cases reviewed. The majority of placements were Treatment Foster Care (Private) (27%), Pre-Finalized Adoption (24%), Regular Foster Care (25%) and Restricted (Relative) Foster Care (8%).

Number of Cases	Placement
7	Formal Kinship Care
67	Pre-Finalized Adoption
70	Regular Foster Care
22	Restricted (Relative) Foster Care
13	Treatment Foster Care
74	Treatment Foster Care (Private)
1	Residential Group Home
11	Therapeutic Group Home
5	Residential Treatment Center
7	Other

### **Placement Stability**

The local boards found that in 72% of the cases reviewed the child/youth were placed in settings that were in close proximity to their communities which allowed for the continuity of services.

The boards also found that in 29% of the cases reviewed there was a change in placement within the 12 months prior to the review for the child/youth.

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

- 53% had the same level of care
- 20% were in less restrictive placements
- 26% were in more restrictive placements

## **Services**

The local boards looked at services offered to the child/youth, the birth family and the foster/kin family in the following areas:

- Housing
- Medical
- Mental health
- Education
- Employment
- Special needs
- Substance abuse treatment
- Visitation with family or referrals to needed resources

The boards found that appropriate services were offered to the child/youth in 276 out of the 277 cases reviewed, the birth family in 39% of the cases, and the foster/kin family in 61% of the cases.

## **Health/Mental Health**

The local boards found that in 94% of the cases reviewed the child/youth received comprehensive health and mental health assessments. Medical records were found in the cases records in 73% of the cases and the child/youth had their health and mental health needs met by the local departments in 49% of the cases. In 25% of the cases the child/youth had developmental or special needs. Psychotropic medication was prescribed to address mental health issues in 30% of the cases, and in 2 out of 277 cases reviewed the child/youth had substance abuse issues.

## **Education and Employment**

The local boards found that in 97% of the cases reviewed the child/youth were being prepared to meet educational goals. 29 out of 38 eligible youth were being appropriately prepared to meet employment goals, and 7 youth were participating in paid or unpaid work experience.

## **Risk and Safety**

The local boards found that 5% of the cases reviewed had risk indicators and safety protocols were followed.

## **Barriers to Adoption**

The local boards identified the following Barriers preventing the adoption process or preventing progress in child/youth's case:

- Pre-adoptive resources not identified for child
- Appeal by Birth Parents
- Child In Pre-adoptive home, but adoption not finalized
- TPR not granted

## **Termination of Parental Rights (TPR)**

The local boards found that (TPR) was filed in a timely manner in 75% of the cases reviewed, and was appealed in only 6%.

## **Child's Consent to Adoption**

The age of consent for adoption in the State of Maryland is ten. Children 10 and older must consent to be adopted. Local boards found that the child/youth consented to adoption in 60 of the total cases reviewed for all permanency plans.

### **Consent to Adoption for Cases Reviewed with Adoption Plans**

<b>Child's Consent to Adoption</b>	<b>Cases</b>
Yes	48
Child did not want to be Adopted	34
N/A under age of consent	148
Unknown	37
Medically Fragile/Mental Health	7
Yes, with conditions	3

## **Pre-Adoptive Services and Resources**

### **Services:**

The local boards found that appropriate services and supports for the pre-adoptive family were in place to meet identified needs in 97% of the cases reviewed.

The local boards found that a social summary had been given to the pre-adoptive family in 100 of the cases reviewed.

### **Resources:**

The local boards found that the pre-adoptive placements were appropriate in 97% of the cases reviewed.

The boards found the following pre-adoptive resources:

- 57 - Former Foster Parent
- 42 - Relative/Kin
- 120 - Non-Relative/Foster

### **Post Adoptive Services**

The local boards found that post adoptive services were needed in 89% of the cases reviewed. These services include medical and multiple other services.

### **Case Planning**

Service Agreements: The local boards found that in 43 of the cases reviewed a signed service agreement was in place.

Family Involvement: The local boards found that in 90% of the cases reviewed an effort was made to include the family in the case planning process.

CASA (Court Appointed Special Advocate): The local boards found that in 24% of the cases reviewed the child/youth had a court appointed special advocate.

### **Frequency of Caseworker Visits**

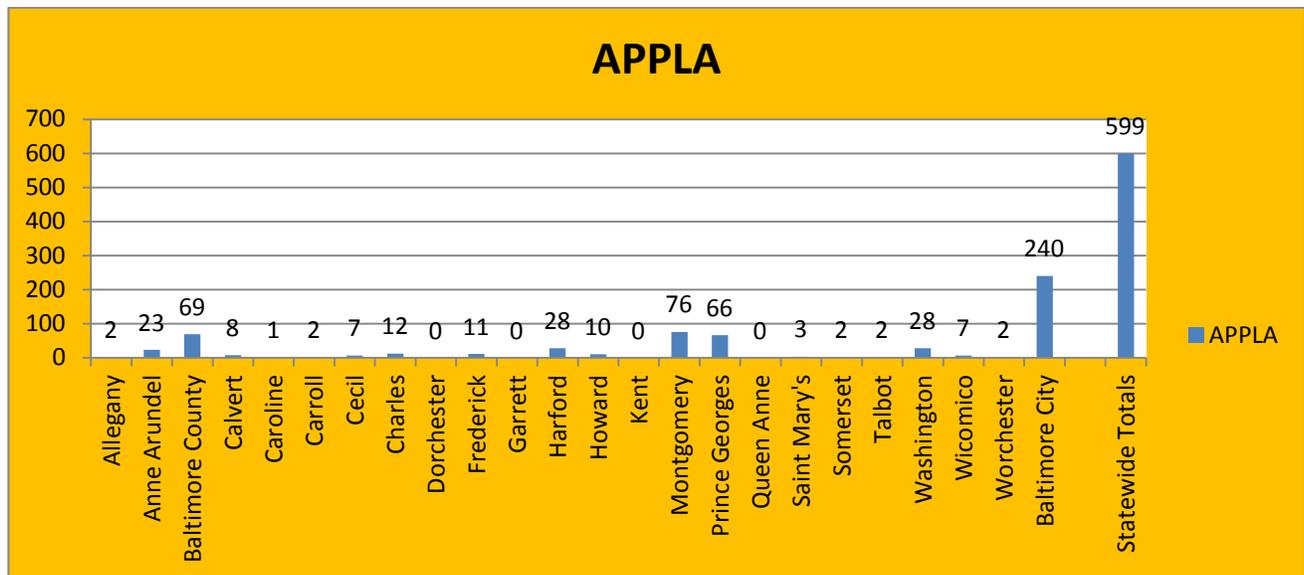
Frequency	Cases
Once a week	10
More than once a week	0
Less than once a week, but at least twice a month	17
Less than twice a month, but at least once a month	248
Less than once a month	1
Quarterly	1

## APPLA Reviews

### (Another Planned Permanent Living Arrangement )

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

Out of the total number of cases reviewed, 44% of the cases had a plan of APPLA and of those cases reviewed, Baltimore City had the most (240 cases) 40%. Montgomery County had (76) 13%, Baltimore County (69) 12% and Prince George's County (66) 11%. The other counties had five percent or less. Many of the cases reviewed were cases of older youth, between 17 and 20 years of age who are expected to remain in care until they age out on their 21<sup>st</sup> birthday.



### Permanency

The local boards agreed with the permanency plan of APPLA in 96% of the 599 cases reviewed and recommended the following alternate plans for the remaining cases:

- Adoption: 1%
- Relative Placement: 1%
- Renification: 1%
- Custody/Guardianship: 1%

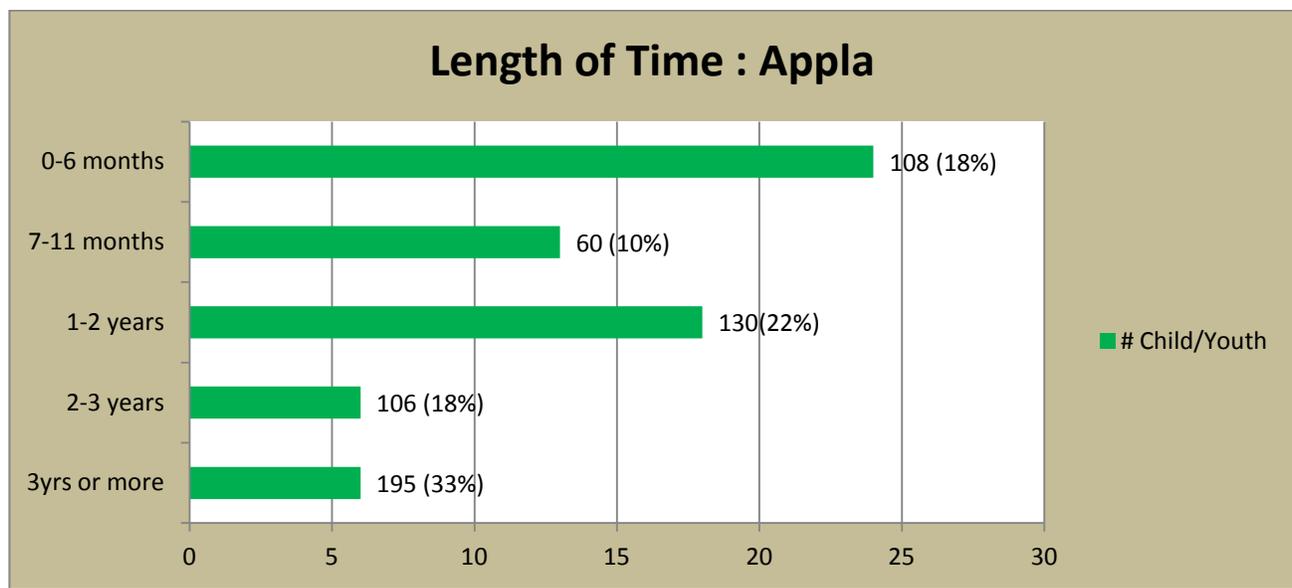
### **Category of APPLA plan**

The local boards found the following categories of the APPLA plan:

- Emancipation/Independence: 535
- Long Term Out of Home Placement with a Non-Relative: 29
- Placement in Long Term Facility pending Adult Facility: 35

### **Length of time Child/Youth had a plan of APPLA**

Of the 599 APPLA cases reviewed the local boards found that the length of time the child/youth had a plan of APPLA were as follows;



### **Placement**

The local boards agreed with the departments' placement plan in 96% of cases reviewed. The majority of placements were in Private Treatment Foster Care (23%), Independent Living Residential Program (15%), Treatment Foster Care (13%), Therapeutic Group Homes (10%), Regular Foster Care (3%), and Residential Treatment Centers (6%).

Number of Cases	Placement
4	Formal Kinship Care
18	Regular Foster Care
8	Restricted (Relative) Foster Care
76	Treatment Foster Care
136	Treatment Foster Care (Private)
4	Alternative Living Unit
8	Residential Group Home
12	Teen Mother Program
57	Therapeutic Group Home
88	Independent Living Residential Program
35	Residential Treatment Center
20	Relative
13	Non-Relative
42	Own Dwelling
71	Other

### **Placement Stability**

The local boards found that in 66% of the cases reviewed the child/youth were placed in settings that were in close proximity to their communities which allowed for the continuity of services.

The boards also found that in 298 cases reviewed there was a change in the placement in the last 12 months prior to being reviewed.

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

- 142 had the same level of care
- 106 were in less restrictive placements
- 50 were in more restrictive placements

### **Services**

The local boards looked at services offered to the children/youth, the birth family and the foster/kin family in the following areas:

- Housing
- Medical
- Mental health
- Education
- Employment
- Special needs

- Substance abuse treatment
- Visitation with family or referrals to needed resources

The boards found that appropriate services were offered to the children/youth in 96% of the cases reviewed the birth family in 31% of the cases, and the foster/kin family in 40% of the cases.

### **Health/Mental Health**

The local boards found that in 89% of the cases reviewed the child/youth received comprehensive health and mental health assessments. Medical records were found in the cases records in 57% of the cases and the child/youth had their health and mental health needs met by the local departments in 43% of the cases. In 21% of the cases the child/youth had developmental or special needs. Psychotropic medication was prescribed to address mental health issues in 33% of the cases, and in 14% of the cases reviewed the child/youth had substance abuse issues.

### **Education and Employment**

The local boards found that 92% of the children/youth were being prepared to meet educational goals. 586 of the youth were 14 years and older. 215 of the youth were participating in paid or unpaid work experience, and 371 were being appropriately prepared to meet employment goals.

### **Risk and Safety**

The local boards found that 5% of the cases reviewed had risk indicators and safety protocols were followed.

### **Permanent Connections**

A permanent connection is an identified person that a child/youth can rely on for support, advice and guidance as they transition into adulthood. This connection can be sought out by the local department or the child/youth may identify them. Permanent connections are often extended family members that have a vested interest in the well being and future of the child/youth; also community members that have known the child/youth for many years and have grown attached to them.

The local boards found that in 427 of the cases reviewed a permanent connection had been identified for the child/youth by the local department and that the identified permanent connection was appropriate in all of the cases reviewed.

### **Case Planning**

Service Agreements: The local boards found that in 49% of the cases reviewed a signed service agreement was in place.

Family Involvement: The local boards found that in 84% of the cases reviewed an effort was made to include the family in the case planning process.

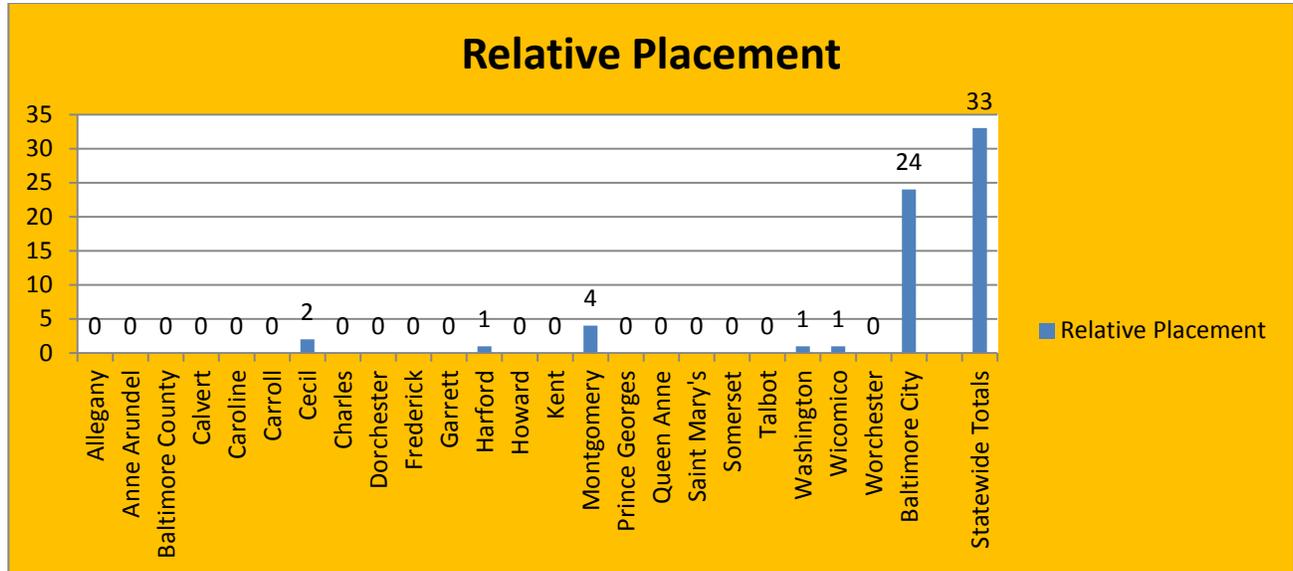
CASA (Court Appointed Special Advocate): The local boards found that in 21% of the cases reviewed the child/youth had a court appointed special advocate.

**Frequency of Caseworker Visits**

Frequency	Cases
Once a week	7
More than once a week	12
Less than once a week, but at least twice a month	20
Less than twice a month, but at least once a month	535
Less than once a month	20
Quarterly	5

## Relative Placement Case Reviews

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



### Permanency

The local boards agreed with the permanency plan of relative placement in 67% of the 33 cases reviewed and recommended the following alternate plans for the remaining cases:

- APPLA: 3%
- Adoption: 21%
- Custody/Guardianship: 9%

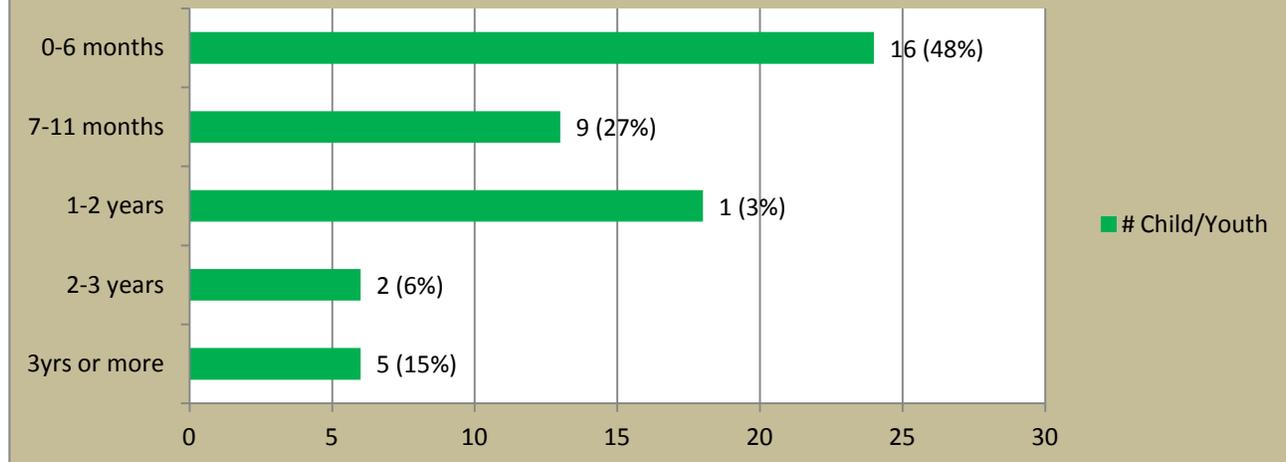
### Category of Relative Placement

- Relative placement for Adoption: 5 cases
- Relative placement for Custody/Guardianship: 28 cases

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

Of the 33 cases reviewed the local boards found that the length of time the child/youth had a plan of Relative Placement were as follows:

## Length of Time : Relative Placement



### **Placement**

The local boards agreed with the placement plan in all of the cases reviewed. The majority of placements were with a Relative (25%), Treatment Foster Care (22%), and Formal Kinship Care (18%).

Number of Cases	Placement
4	Emergency Foster Care
5	Formal Kinship Care
1	Refugee Child
12	Restricted (Relative) Foster Care
6	Treatment Foster Care (Private)
2	Therapeutic Group Home
1	Residential Treatment Center
1	Non-Relative
1	Other

### **Placement Stability**

The local boards found that in 58% of the cases reviewed the child/youth was placed in settings that were in close proximity to their communities which allowed for the continuity of services.

The boards also found that in 12 cases reviewed there was a change in placement within the 12 months prior to the review for the child/youth in regards to level of care.

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

- 4 had the same level of care
- 5 were in less restrictive placements
- 3 were in more restrictive placements

## **Services**

The local boards looked at services offered to the child/youth, the birth family and the foster/kin family in the following areas:

- Housing
- Medical
- Mental health
- Education
- Employment
- Special needs
- Substance abuse treatment
- Visitation with family or referrals to needed resources

The local boards found that appropriate services were offered to the child/youth in 26 of the 33 cases reviewed, the birth family in 19 of the cases, and the foster/kin family in 23 of the cases.

## **Health/Mental Health**

The local boards found that in 61% of the cases reviewed the child/youth received comprehensive health and mental health assessments. Medical records were found in the cases records in 48% of the cases and the child/youth had their health and mental health needs met by the local departments in 67% of the cases. In 10% of the cases the child/youth had developmental or special needs. Psychotropic medication was prescribed to address mental health issues in 33% of the cases, and in 1 of the cases reviewed the child/youth had substance abuse issues.

## **Education and Employment**

The local boards found that in 55% of the cases reviewed the child/youth were being prepared to meet educational goals. There were 2 youth participating in paid or unpaid work experience. The local board found that in 8 of the 9 cases reviewed where the youth was eligible, the youth was being appropriately prepared to meet employment goals.

## **Risk and Safety**

The local boards found that 25% of the cases reviewed had risk indicators and safety protocols were followed.

## **Case Planning**

Service Agreements: The local boards found that in 45% of the cases reviewed a signed service agreement was in place.

Family Involvement: The local boards found that in 73% of the cases reviewed an effort was made to include the family in the case planning process.

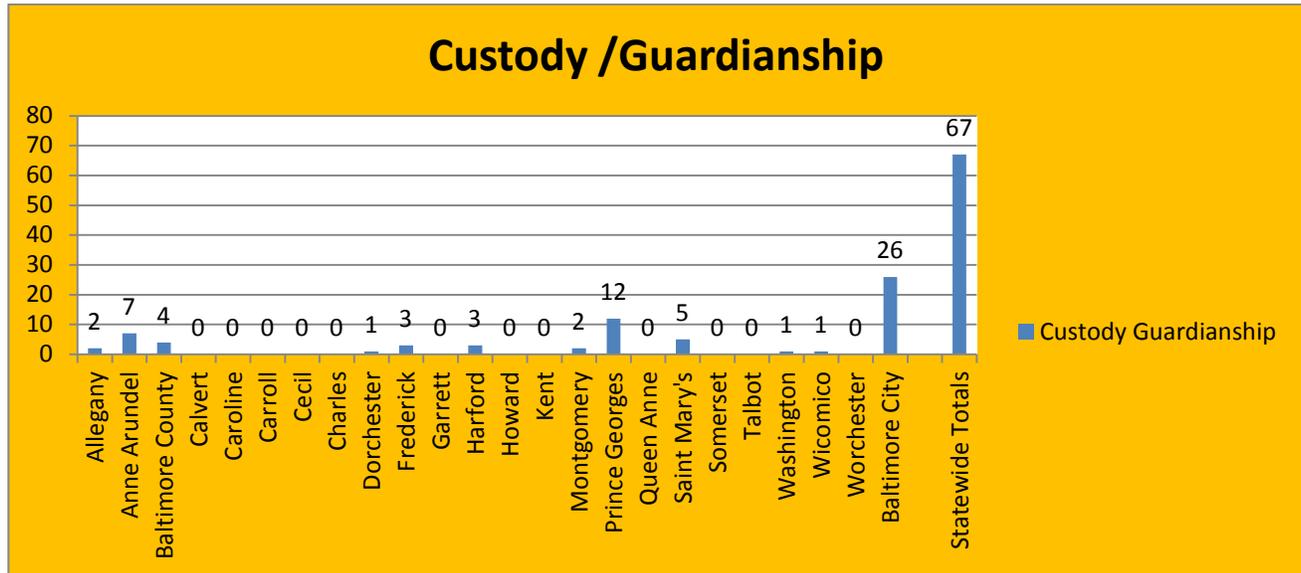
CASA (Court Appointed Special Advocate): The local boards found that in 2 cases reviewed the child/youth had a court appointed special advocate.

## **Frequency of Caseworker Visits**

Frequency	Cases
Once a week	5
More than once a week	4
Less than once a week, but at least twice a month	
Less than twice a month, but at least once a month	24
Less than once a month	
Quarterly	

## Custody/Guardianship (Non-Relative) Reviews

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



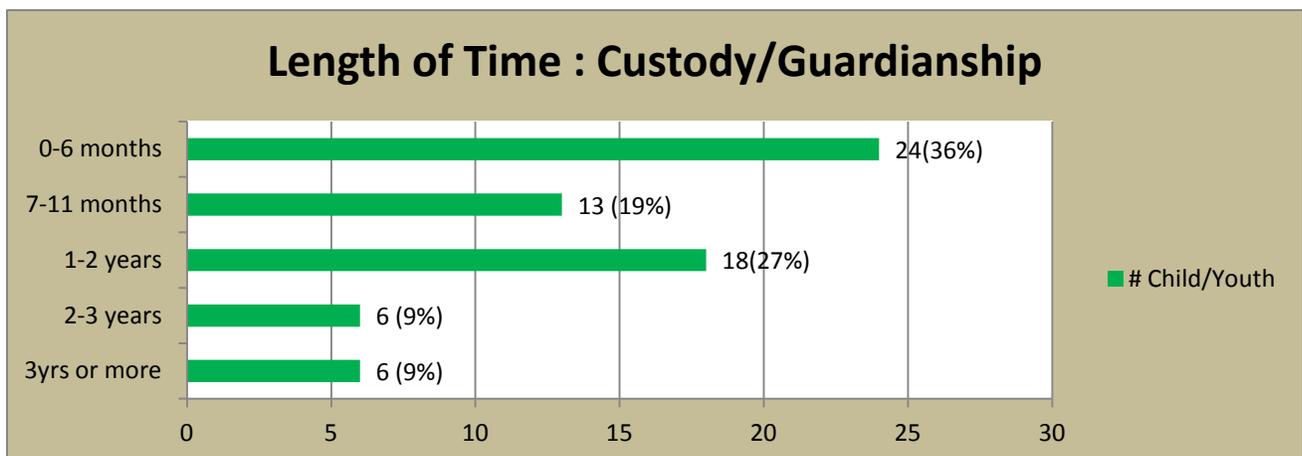
### Permanency

The local boards agreed with the permanency plan of custody/guardianship in 80% of the 67 cases reviewed and recommended the following alternate plans for the remaining cases:

- APPLA: 13%
- Relative Placement: 7%

### Length of time a Child/Youth had a plan of Guardianship

Of the 67 cases reviewed the local boards determined that the length of time the child/youth had a plan of Guardianship were as follows;



## **Placement**

The local boards agreed with the departments' placement plan in 100% of cases reviewed. The majority of placements were in Private Treatment Foster Care (37%) , Treatment Foster Care (25%) and Regular Foster Care (16%) .

Number of Cases	Placement
1	Pre-Finalized Adoptive Home
11	Regular Foster Care
3	Restricted (Relative) Foster Care
17	Treatment Foster Care
25	Treatment Foster Care (Private)
1	Teen Mother Program
3	Therapeutic Group Home
4	Residential Treatment Center
2	Other

## **Placement Stability**

The local boards found that in 76% of the cases reviewed the child/youth were placed in settings that were in close proximity to their communities which allowed for the continuity of services.

The boards also found that in 30 of the cases reviewed there was a change in the placement in the last 12 months prior to being reviewed.

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

- 15 had the same level of care
- 10 were in less restrictive placements
- 5 were in more restrictive placements

## **Services**

The local boards looked at services offered to the children/youth, the birth family and the foster/kin family in the following areas:

- Housing
- Medical
- Mental health
- Education
- Employment

- Special needs
- Substance abuse treatment
- Visitation with family or referrals to needed resources

The local boards found that appropriate services were offered to the children/youth in 48% of the cases reviewed, the birth family in 39% of the cases, and the foster/kin family in 45% of the cases.

### **Health/Mental Health**

The local boards found that in 90% of the cases reviewed the child/youth received comprehensive health and mental health assessments. Medical records were found in the cases records in 69% of the cases and the child/youth had their health and mental health needs met by the local departments in 52% of the cases. In 24% of the cases the child/youth had developmental or special needs. Psychotropic medication was prescribed to address mental health issues in 36% of the cases, and in 3 cases reviewed the child/youth had substance abuse issues.

### **Education and Employment**

The local boards found that in 87% of the cases reviewed, the children/youth were being prepared to meet educational goals. 10% of the youth were participating in paid or unpaid work experience. The local board found that in 90% of the cases where youth were eligible, the youth were being appropriately prepared to meet employment goals.

### **Risk and Safety**

The local boards found that 10% of the cases reviewed had risk indicators and safety protocols were followed.

### **Case Planning**

Service Agreements: The local boards found that in 34% of the cases reviewed a signed service agreement was in place.

Family Involvement: The local boards found that in 94% of the cases reviewed an effort was made to include the family in the case planning process.

CASA (Court Appointed Special Advocate): The local boards found that in 39% of the cases reviewed the child/youth had a court appointed special advocate.

**Frequency of Caseworker Visits**

Frequency	Cases
Once a week	6
More than once a week	
Less than once a week, but at least twice a month	1
Less than twice a month, but at least once a month	60
Less than once a month	
Quarterly	

## Child Protection Panels

CRBC became a citizen review panel in response to the Federal Child Abuse Prevention and Treatment Act (CAPTA) and state law requiring citizen oversight of the child protection system. Local child protection panels may be established in each jurisdiction. Panel members are appointed by the local appointing authority and local child protection panels report findings and recommendations to the CRBC State Board. Panel activities and reviews submitted by Baltimore City, Baltimore County and Montgomery County are outlined below.

In FY2016, the Baltimore City Child Protection Panel was the only local child protection panel that completed reviews that addressed outcomes as adapted from the DHR approved Child and Family Services Review (CFSR) review instrument.

### Review Findings

There were 15 cases reviews conducted. Findings include the following ;

Outcome Area	Measure	Effectiveness Rating by Panel
Safety Outcome 1	Children are first and foremost protected from abuse and neglect	The outcome was: Substantially achieved in 3 cases Partially Achieved in 6 and Not Achieved in 1 case
Safety Outcome 2	Children are safely maintained in their homes whenever possible and appropriate	The outcome was: Substantially achieved in 5 cases Partially Achieved in 4 cases and Not Achieved in 1 case
Well Being Outcome 1	Families have enhanced capacity to provide for their needs	The outcome was: Substantially achieved in 1 case, Partially achieved in 7 cases and Not achieved in 2 cases
Well Being Outcome 2	Children receive appropriate services to meet their educational needs	The outcome was: Substantially Achieved in 2 cases, Partially Achieved in 1 case, not Achieved in 1 case and Not Applicable in 6 cases

Well Being Outcome 3	Children receive adequate services to meet their physical and mental health needs	The outcome was: Substantially Achieved in 1 case, Partially Achieved in 4 Cases and Not achieved in 4 Cases.
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### **Child Protection Services In-Home-Care Cases**

- The panel reported that some cases were closed to soon. These were cases where referrals had been made but there was no follow up to see if referrals were followed through before the cases were closed.

### **Services to Children and Families**

- The panel reported concerns regarding the lack of getting fathers involved in the provision of services, especially when the father is living in the home or is involved with the children.
- The panel reported that there continues to be a lack of documentation of referrals, school or medical records mentioned in Local Department of Social Services (LDSS) records. LDSS frequently fails to follow up on mental health and substance abuse referrals for parents so there is no evidence that the parent actually benefited from the referral.
- The panel reported concerns that older children were interviewed in the presence of the parents when home visits were done. They advised that older children should be interviewed out of the parents' presence, such as in a school setting.

## **CITIZEN'S REVIEW PANEL FOR CHILDREN**

### **Summary FY2016**

#### Montgomery County Council Health and Human Services Committee

The Citizens Review Panel examines the extent to which the County agency effectively implements the child protection standards and State plan under 42 USC section 5106a(b). The Panel also reviews other criteria it considers important for the protection of children.

The Panel believes that its' responsibility is to ensure that maltreated children receive the services and support they need. The Committee's priority in FY16 was to focus on the needs of children voluntarily placed (VPA cases) in the child welfare system.

Voluntary placement (VPA) legislation was created to address the needs of those children/youth whose parents could no longer provide for them. Initially, in 2001-2002, there were approximately 7 cases in the system. In early FY16 there were 35 cases, nearly 10 percent of the child welfare foster care caseload. The primary reason parents ask for a voluntary placement is because their children have severe mental health needs or complex developmental disabilities. The Panel's goal this year was to review these cases to identify who these children are and if there are service gaps that need to be addressed. Focus was on identifying how these children were referred to child welfare, what happens when these youth 'age out' of the child welfare system, identification of any community services needed to prevent these placements, and how coordination between county agencies occurs.

The Panel completed all case reviews and conducted interviews with child welfare agency social workers and supervisors, the liaison with the Department of Education, and the county attorney who has represented the majority of the cases. The final report of the VPA case review has not been completed.

The Panel had 4 new members join in the Spring 2016, replacing several vacant seats. New members represent a variety of disciplines: mental health, child welfare research, CWS social work, and the business community.

#### Montgomery County Child Protection Panel Members

Lisa Merkin (Staff)	George Gabel
Ronna Cook (Chair)	Jane Steinberg
Leslie Shedlin	Klaofa Kavanagh
Ali Khoshnevissan	Jen Carson
Clara Valenzuela	Pamela Littlewood

## **Baltimore County Child Protection Panel**

### Accomplishments

- Developed and pilot tested a Medical Checklist for CPS workers to request information from medical providers.
- Researched and discussed challenges with youth from other jurisdictions who run away from placements in Baltimore County group homes and treatment foster homes. Advocated for DHR Office of Licensing and Monitoring to encourage improved communication from placement agencies to law enforcement.
- Promoted collaboration among DSS and BCPS for mental health crisis intervention services for students.
- Shared information with the Child Protection Panel regarding anti-bullying grants received by BCPS, Alternative Response implementation and sustainability by DSS, Substance Exposed Newborn services provided by DSS, Maryland's IV-E Waiver and changes to priorities from the Governor's Office of Children and Local Management Boards.
- Conducted a strategic planning process to identify priority areas for the Child Protection Panel to address over the next 2-3 years:
  - Improving and expanding capacity for medical evaluation and reporting of child abuse and neglect in Baltimore County.
  - Educating the medical community regarding child abuse/neglect.
  - Advocating for more Child Protection Teams at area hospitals.
  - Addressing challenges and ensuring a strong response to cases of criminal child neglect.
  - Prevention and services to runaways, including sex trafficking.

### Membership

Mark Millspaugh, Chair (Baltimore County DSS)

Linda Grossman, M.D. (Baltimore County Department of Health)

Meg Ferguson, J.D. (Baltimore County Assistance County Attorney)

Scott Krugma, M.D. (Community)

Lt. Glen Wiedeck (BCPD)

Laura Steele (CRBC)

Nancy Slaterbeck, LCSW-C (Community)

Brynez Roane, LGSW (Community)

Richard Muth (BCPS)

Patricia Cronin, LCSW-C (Community)

Keith Pion, J.D. (Baltimore County State's Attorney's Office)

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Mr. Bryant Wilson  
Ms. Norma Lee Young

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**Debbie Ramelmeier, LCSW-C, J.D.**  
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