Citizens Review Board For Children







ANNUAL REPORT FISCAL 2023

(July 1st 2022 - June 30th 2023)

Table of Contents

Introduction	
By the CRBC State Board Chair FY2023	
Executive Summary	
Child Welfare Barriers	
Recommendations to DHS for FY2023	
Acknowledgements	
SSA Response to CRBC's FY2021 Annual Report	
From SSA Executive Director	
CRBC Program Description	13
Mission	
Vision	14
Goals	
Discrimination	14
Confidentiality	14
CRBC Appointments and FY2023 Activities	
FY2023 New Appointments	
Educational Advocacy	
Training	
Promoting Safety, Well-Being and Permanency	
Meetings and Advocacy	
FY2023 Legislative Activities	
FY2023 Out-of-Home Placement Case Reviews	
Targeted Review Criteria	
Case Review Findings by Permanency Plans and Jurisdiction	
Gender Totals	
Ethnicity Overall	
Age Range by Permanency Plan	
FY2023 Case Reviews by Jurisdiction/Permanecy Plan	
Health and Education	
Reunification	
Non-Relative Adoption	
APPLA	
Relative Placement for Adoption	
Non-Relative Custody and Guardianship	
Relative Placement for Custody and Guardianship	
Montgomery County Citizen Reivew Panel	42
FY2023 CRBC State Board	
FY2023 CRBC Volunteer Board Members	
CRBC Staff Members	
References	46

Introduction

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

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

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

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

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

Since January 2021, the local Boards have conducted virtual instead of in person case reviews of children in Out-of-Home Placement for all Local Department of Social Services and in every jurisdiction. Individual recommendations regarding permanency, placement, safety and well-being are sent to the Local Juvenile Courts, the LDSS and interested parties involved with the child's care.

This CRBC FY2023 Annual Report contains CRBC's findings from our case reviews, advocacy efforts, Montgomery County CPS panel activities and recommendations for systemic improvements.

On behalf of the State Board of the Maryland Citizens Review Board for Children (CRBC), it's staff and citizen volunteer board members, I present our Fiscal 2023 Annual Report.

Sincerely,

Nettie Anderson-Burrs State Board Chair

Executive Summary

As a result of the COVID-19 Pandemic during 2020 not only have children, youth and families been exposed to and experienced additional stressors but child welfare serving agencies have also been challenged with trying to meet the increasing demand for services and the needs of Maryland's most vulnerable. Child welfare serving agencies are charged with meeting the demand while addressing the need for additional resources including services, placement resources and child welfare staff throughout most of the state. Lingering effects continued to impact systems and highlight others including the need for appropriate placements, and a capable child welfare workforce that is supported with the necessary resources including data, data access, shareability of relevant information and staff training to ensure appropriate oversight of Maryland's most vulnerable children and families' needs.

Demographic changes continued due to child welfare staff turnover. In some cases, without the opportunity for preparation and transfer of knowledge. Trends that were highlighted by the COVID-19 Pandemic, hiring delays, salary, advancement opportunities, childcare, employment and work flexibility impacted the workforce. These changes ultimately impact the delivery and quality of services, safety, well-being and permanency for children in out of home placement.

Older youth aging out of care present with persistent complexities for child welfare staff. Expanding and investing in strategies for workforce recruitment, development and retention is necessary to support the challenging and necessary work of child welfare staff. Similarly, exploring new and innovative strategies and ways to engage and work with older youth would support improved outcomes and preparedness for transitioning youth or emerging adults.

During fiscal year 2023, the Citizens Review Board for Children reviewed 703 cases of children and youth in Out-of-Home Placements. Reviews are conducted per a work plan developed in coordination with DHS and SSA with targeted review criteria based on Out-of-Home Placement permanency plans. This report includes Out-of-Home Placement review findings for health, education and older youth, CRBC activities including legislative advocacy and recommendations for system improvement for fiscal FY2023.

Health and Education Findings for statewide reviews include:

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

- Approximately 61 (9%) of the children/youths were prescribed medication.
- Approximately 215 (31%) of the children/youths were prescribed psychotropic medication.

- The local boards found that there were completed medical records for 284 (40%) of the total cases reviewed.
- The local boards found that for 322 (46%) of the 703 total cases reviewed, the health needs of the children/youth had been met.
- 244 (48%) out of the 505 youth enrolled in school had a 504 or IEP plan.
- 45 (20%) out of 222 youth that were disabled and exiting school were aware of and engaged with community supports.
- The local boards agreed that 441 (63%) of the children/youth were being appropriately prepared to meet educational goals.

Demographic findings for statewide reviews include:

- 397 (56%) of the children/youth were African American.
- 234 (33%) of the children/youth were Caucasian.
- 345 (49%) of the children/youth were Male.
- 358 (51%) of the children/youth were Female.

CRBC conducted 278 Reunification reviews. Findings include:

- 64 cases (30%) had a plan of reunification for 3 or more years.
- The local boards agreed with the placement plan for 176 (63%) of the cases reviewed.
- The local boards found that service agreements were signed for 69 (25%) of the eligible cases reviewed. Two of the cases were post termination of parental rights and the child was under 14.
- The local boards agreed that the signed service agreements were appropriate to meet the needs of 63 (91%) of the 69 the children/youths.

CRBC conducted 148 Adoption reviews. Findings include:

- 9 (8%) of the 119 non-relative placement for adoption cases had a plan of adoption for 3 or more years.
- The local boards agreed with the placement plan for 118 (99%) of the 119 cases reviewed
- 2 (7%) of the 29 relative placement for adoption cases had a plan of adoption for 3 or more years.
- The local boards agreed with the placement plan for 27 (93%) of the 29 cases reviewed

Barriers that typically prevent the adoption process or that prevent progress in the child's case include:

- Pre-Adoptive resources not identified.
- > Child in pre-adoptive home, but adoption not finalized.
- > Efforts not made to move towards finalization.
- Child does not consent.
- > Appeal by birth parents.
- Other court related barrier.

CRBC conducted 172 (APPLA) reviews - Another Planned Permanent Living Arrangement

APPLA is the least desired permanency plan and should only be considered when all other permanency options have been thoroughly explored and ruled out. APPLA is often synonymous with long term foster care. Many youths with a permanency planning goal of APPLA remain in care until their case is closed when they age out of the foster care system at 21. Findings include:

- 48 (28%) of the cases had a plan of APPLA for 3 or more years.
- The local boards agreed with the permanency plan of APPLA for 170 (99%) of the 172 cases statewide. 161 of the cases reviewed with a permanency plan of APPLA were youth between the ages of 17-20.
- A permanent connection is an identified person that a youth can rely on for assistance with support, advice and guidance as they deal with the day-to-day life circumstances that adulthood can bring about on a regular basis. The local boards agreed that for 155 (90%) of the 172 cases of youth with a permanency planning goal of APPLA that a permanent connection had been identified, and the local boards agreed that the identified permanent connections were appropriate for 148 (95%) of the 155 cases.

Barriers/Issues

Typical barriers to permanency/issues:

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

Ready By 21 (Transitioning Youth)

Age of Youth (14 years and older all permanency plans = 331 cases)

- 121 (37%) of the 331 youths reviewed were between 14-16 years old.
- 114 (49%) of the 331 youths reviewed were between 17-19 years old.
- 47 (14%) of the 331 youths reviewed were 20 years old.

Independent Living skills

• The local boards agreed that 161 (49%) of the eligible youths were receiving appropriate services to prepare for independent living.

Employment

- The local boards found that 111 (33%) of the eligible youths were employed or participating in paid or unpaid work experience.
- The local boards agreed that 47 (14%) of the eligible youths were being appropriately prepared to meet employment goals.

Housing (47 cases)

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

- The local boards found that 34 (72%) of the 47 youths had a housing plan specified.
- The local boards agreed that 35 (45%) youths were being appropriately prepared for transitioning out of care, 5 were not being appropriately prepared, 2 were not transitioning.

Concurrent Planning

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

At least 21 states have linked concurrent planning to positive results including reduced time to permanency and establishing appropriate permanency goals, enhanced reunification or adoption efforts by engaging parents and reduced time to adoption finalization over the course of two review cycles of the Federal Child and Family Services Review (Child Welfare Information Gateway, Issue Brief 2012, Children's Bureau/ACYF). DHS/SSA Policy Directive#13-2, dated October 12, 2012 was developed as a result of Maryland reviewing case planning policy including best practices and concurrent planning as part of Maryland's performance improvement plan. CRBC supports concurrent planning when used in accordance with state policy to achieve goals of promoting safety, well-being, and permanency for children in out of home placement, reducing the number of placements in foster care and maintaining continuity of relationships with family, friends and community resources for children in out-of-home care.

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

The local boards found the following in statewide reviews:

- A total of 196 (37%) of the 531 eligible cases had a concurrent permanency plan identified by the Local Juvenile Courts.
- The Local Departments (LDSS) were implementing the concurrent permanency plans identified by the Local Juvenile Courts for 86 (44%) of the 196 cases.
- The local boards found that for 133 (25%) of the eligible cases the Local Departments (LDSS) were engaged in concurrent planning.

Child Welfare Barriers

There has been an increasing number of children and youth without a placement option due to challenging behaviors. In some instances, children and youth with challenging behaviors have remained in hospitals or emergency rooms for extended periods of time due to a lack of placement or while waiting for placement. As a result, children and youth are deprived of services that they have a right to including education, recreation and socialization. In some cases, these stays or overstays when the stays are not deemed medically necessary put children and youth at further risk for anxiety, depression and possibly harm due to the trauma. In May 2023 Disability Rights Maryland and Venable LLP*1 filed a complaint against the Department of Human Services and Maryland Department of Health (MDH) for failure to provide appropriate placements and services for children in hospitals and emergency departments without it being medically necessary. This lawsuit was filed on behalf of foster children who were currently lingering in hospitals or emergency departments without medical necessity and for those at risk of lingering in emergency departments and hospitals.

On January 17, 2023 a lawsuit was filed against Maryland's foster care system over the administration of psychotropic medications for children. The lawsuit filed by ACLU, Disability Rights Maryland and Children's Rights alleged that over the course of a decade DHS and SSA failed to maintain adequate medical records, and had not established a policy of informed consent, where an adult responsible for the child could consult on their medications. It also alleged that the state has not built a secondary review system to ensure that medications are properly prescribed.

¹ <u>Veneble, LLP Article, Mitchell Mirviss, May 30, 2023</u> <u>CBS News Article, Mike Helgren, June 2, 2023</u> Class Action.org, Kelly Mehorter, January 19, 2023

CRBC Recommendations to the Department of Human Services

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

²Child Welfare Information Gateway https://www.childwelfare.gov

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

Acknowledgements

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

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

SSA Response to the CRBC FY2021 Annual Report

(Reprinted for inclusion in Annual Report)



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

April 26, 2022

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

Dear Ms. Anderson-Burrs and Review Board Members:

The Department of Human Services, Social Services Administration (DHS/SSA) extends its appreciation for the work of the Citizens Review Board for Children (CRBC). The CRBC annual report provides information that is essential for DHS/SSA to improve its services to Maryland's families, children, and youth who are involved with the child welfare system. The constructive feedback contained in the report, as well as the information received during meetings with CRBC leadership, contribute a great deal to our Continuous Quality Improvement (CQI) efforts.

DHS/SSA recognizes the need for consistent availability of critical services to meet the complex and individual needs of the families, children, and youth we serve. Across Maryland, we continue to strengthen partnerships with key service providers, stakeholders, sister agencies, and community partners to better coordinate services, communicate the needs of children and families, and raise awareness regarding needed services. The Department has implemented a phased roll-out to expand its capacity to serve families, children, and youth with prevention focused evidence-based practices (EBPs) across Maryland in 18 jurisdictions. Families First Prevention Services Act made it possible to expand offering Healthy Families America, Parent Child Interaction Therapy, Multisystemic Therapy, and Functional Family Therapy in Maryland in order to build upon the success we have already seen serving families with these EBPs in some jurisdictions.

In addition, DHS/SSA recognizes the importance of developing consistent and trauma-responsive services for Maryland's children, youth, families, and vulnerable adults. Maryland implemented its Integrated Practice Model (IPM) in 2020 and has continued to provide coaching to supervisory teams across the State in order to support consistent service delivery. The IPM espouses principles of practice to ensure our services are family-centered, individualized and strengths-based, trauma-responsive, outcomes driven, community-focused, and culturally and linguistically responsive. The IPM also highlights the need for a safe, engaged, and well-prepared professional workforce and aligns with CRBC's recommendations.

Of particular note, the CRBC report recommends that the Department develop a system to track and monitor health including mental health of children and youth in out-of-home placement. Under the

leadership of the DHS Child Welfare Medical Director, the Department entered into an agreement with the Chesapeake Regional Information System for our Patients (CRISP). This agreement allows the DHS Child Welfare Medical Director to access CRISP data in order to identify the health and wellness needs of children in the Department's care.

DHS/SSA has also partnered with the Governor's Office for Crime Prevention Youth and Victim Services and the Maryland Department of Health (MDH) to engage our private placement providers in discussions regarding access to higher levels of care. Through coordination with MDH, Maryland continues to offer Voluntary Placement Agreements to those families whose youth are eligible for a higher level of care reducing the number of youths in the State's care and custody. In support of creating lasting permanency for children and youth in care, DHS/SSA has also entered into two contracts - Family Connections Program and Child Maltreatment Prevention Services striving to increase kinship placements and permanency resources. Additionally, DHA/SSA has developed contracts to provide adoption counseling and pre- and post-adoption support services to children, youth, and families. In regard to adoption counseling for youth who did not consent to adoption, DHS/SSA plans to explore the services offered to youth and what, if any, additional pre-adoption supports are needed. The Department remains committed to working diligently to address barriers to permanency for Maryland's children.

The CRBC recommendations around older youth transition planning, including planning for housing and other independent living skills are currently being explored by our Placement and Permanency Implementation Team. This team continues to provide support and guidance on SSA's broader goals of ensuring children, youth and vulnerable adults are:

- > Safe and free from maltreatment
- ➤ Living with safe, supportive, and stable families and in least restrictive environments where they can grow and thrive
- Able to achieve timely and lasting permanency; and
- Connected with professionals, family members, and other supportive resources to enable them to sustain success upon exiting our child welfare system.

Through our Implementation Teamwork, DHS/SSA has updated the Youth Transition Plan (YTP) and process. This includes the integration of youth voice and allows space for growth and change over time. Transitional planning should begin for youth at age 14 to include housing, education, employment, and mentoring. Our goal is that all child welfare professionals who work with youth will view transitional planning as a process that unfolds over time and requires close youth involvement and ongoing engagement.

As such, the YTP is a youth driven document that is designed to be utilized statewide by all transition-age youth. To ensure services meet the needs of Maryland's youth in care, the YTP process includes an instructional video specifically tailored to our older youth. The YTP is also available online via Maryland's MyLife website. In addition, to address the housing needs of youth emerging from foster care, DHS/SSA maintains its partnership with the U.S. Department of Housing and Urban Development (HUD) to support maintenance of the Family Unification Program (FUP). DHS/SSA has also collaborated with the Maryland Developmental Disabilities Administration (DDA) to locate sustainable housing for youth who have disabilities.

The CRBC's careful assessment of our practices is very much appreciated. We are committed to continuing to identify and strategically implement best practices to effectively serve children, youth, families, and vulnerable adults across Maryland. We look forward to our ongoing partnership with the CRBC in this regard.

Sincerely,

Denise Conway, LCSW-C Executive Director Social Services Administration Maryland Department of Human Services

311 W. Saratoga Street. Baltimore. MD 21201-3500 Tel: 1-800-332-63471TTY: 1-800-735-22581 www.dhs.maryland.gov

CRBC Program Description

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

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

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

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

The Citizens Review Board for Children consists of Governor appointed volunteers from state and local boards. Currently, there are 35 local review boards representing all 24 jurisdictions (23 counties and Baltimore City). There are currently 143 volunteers serving on local boards, 2 pending appointments by the Governor, 4 applicants pending submission for appointment and 16 pending selections. CRBC reviews cases of children in Out-of-Home Placement, monitors child welfare programs and makes recommendations for system improvements.

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

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

Mission Statement

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

Vision Statement

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

Goals

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

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

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

Discrimination Statement

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

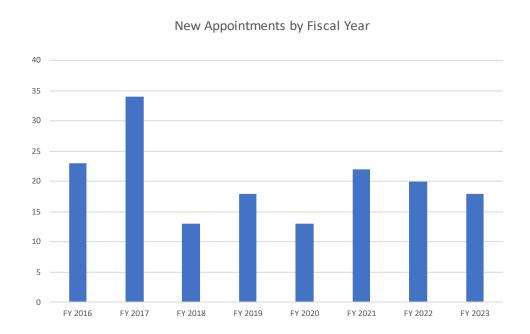
Confidentiality

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

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

CRBC Appointments and FY2023 Activities

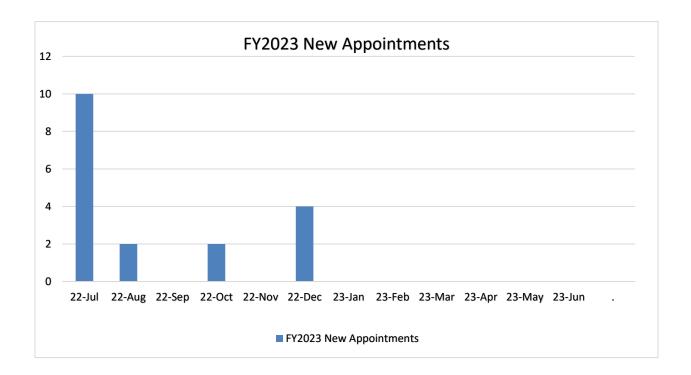
Appointments breakdown By Fiscal Year



There were 23 new members appointed by the Governor to Local Out of Home Placement Review Boards in fiscal year 2016. Thirty-four members were appointed in fiscal year 2017, 13 were appointed in fiscal year 2018, 18 were appointed in fiscal year 2019, 13 were appointed in fiscal year 2020, 22 were appointed in fiscal year 2021 and 20 in 2022.

FY2023 New Appointments

During FY2023, CRBC continued to utilize recruitment and retention strategies to ensure membership and facilitation of reviews in all 23 counties and Baltimore City. Many of CRBC members have been dedicated and committed to serving on behalf of Maryland's most vulnerable children and youth for numerous years. Ongoing recruitment is necessary to account for some expected reduction due to attrition. Recruitment efforts continued to support CRBC's mission, vision and goals. The chart below shows appointments in FY2023.



In FY2023, 18 members were selected by selection committees and appointed by the Governor to local out-of-home placement review boards in jurisdictions where they reside. Members were appointed to the following local boards: Allegany County (1), Baltimore County #4 (1), Carroll County (1), Cecil County (1), Howard County (2), Montgomery County #1 (1), Montgomery County #2 (2), Montgomery County #5 (2), Prince George's County #4 (1), Somerset County (1), Washington County (2), Wicomico County (1), Worcester County (1) and Baltimore City NW#4 (1), CRBC provided orientation, pre-service training and ongoing training, child welfare expertise and guidance for newly appointed members who served in FY2023.

Educational Advocacy

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

Educational concerns consequent COVID that had arisen during the CRBC review process prompted the establishment of an Educational Advocacy Committee (EAC) in fiscal year 2021. The committee is a sub-committee of CRBC's State Board and its purpose is to support CRBC's efforts with advocacy around improvement in educational services for children in foster care. The committee makes recommendations to the State Board. The goal is that all of Maryland's children will have access to safe, equitable and sustainable education to support the well-being and success of all of Maryland's children. This prompted plans for a deeper look of cases including those with Individual Education Plans (IEP) and those cases where a child may be in need of special education services but, as yet, have not been referred. Also, consideration regarding if there was sufficient examination and review of these cases. Additional considerations include the following:

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

The committee engaged in information gathering and a series of meetings with individuals with expertise in education and education advocacy during FY 2021 in addition to review of state and federal policies and guidelines. CRBC also advocated in FY2021 and FY2022 for improved education oversight, training in special educations services for child welfare staff, review of education practices and policy, and additional support for the local department of services regarding resources and processes.

Training

CRBC recognizes the power of communities working together to help families and to prevent child abuse. On April 28, 2023 in commemoration of Child Abuse Prevention Awareness and Volunteer Appreciation, CRBC presented the annual in-service training Special Education: Advocating for Children in Out-of-Home Placement. Volunteers were also acknowledged for their service and commitment to Maryland's most vulnerable children. As a result of a desire and need for child welfare staff across the state to have education around special education services, this training was open to non CRBC members. The panel of experts and presenters included Dr. Sheila C. Iseman, Ph.D., SCI Educational Consultants, Inc, Leslie Seid Margolis, J.D., Managing Attorney and Policy Counsel, Disability Rights Maryland, Kenneth Hudock, Section Chief, Family Support Services, Division of Early Intervention and Special Education Services, Maryland Department of Education, and Paris Brown, Education Liaison, Prince George's County Local Department of Social Services. Seventy members and over 30 non CRBC members attended the training including state level staff such as Natalie Miller, Education Specialist, Department of Human Services and Loney Nguyen, Foster Care Ombudsman. Following the training, non CRBC members were invited to attend a follow up CRBC Education Advocacy Education Committee meeting to provide feedback on the next round of recommendations. Twelve child welfare staff from across the state attended this meeting including Natalie Miller, Education Specialist, DHS. Child Welfare Staff, including social worker and supervisors, shared their feedback including additional need for staff to be educated around special education policy and procedures and developing a list of resources available to staff and families.

Promoting Safety, Well-Being and Permanency

Community

CRBC has been committed to the promotion of awareness and education regarding Adverse Childhood Experiences (ACES) partnering with other child welfare advocates and stakeholders to support these efforts. CRBC has hosted three trainings including introduction to ACES, Trauma informed care and decision making.

CRBC in collaboration with Calvert Family Advocates and the Calvert County Local Department of Social Services (LDSS) held a community forum and presented Understanding Adverse Childhood Experiences (ACES) training followed by an open panel discussion with community partners. Panel members included: Brenda Carr, LCSW-C Child Protective Services Supervisor, Calvert County LDSS, Tonya Kennerly, Program Manager, CASA of Southern Maryland, Det. Joshua Buck, Deputy Sherrif, Calvert County Sherriff's Office, Patricia Hooper, McKinney-Vento Homeless and Foster Care Liaison Specialist, Calvert County Public Schools, Rebecca Cordero, Assistant State's Attorney, Calvert County Maryland. The community forum was attended by over 25 participants. Two attendees, Genna Lee and Troy Anderson were appointed to the Calvert County Review Board in November 2023.

On June 7, 2023, CRBC conducted a community forum in Allegany County in collaboration with CASA of Western Maryland and Allegany College of Maryland. Approximately 15 local community members attended the forum and CEUs were provided. ACES training was provided followed by a discussion panel of community partners including: Tracie Wison, Supervisor of Intake and Child Protective Services, Allegany LDSS, Karen Stansberry, Supervisor for Out of Home Services, Allegany LDSS, Tessa Hoffman, Volunteer Coordinator Supervisor, CASA of Western Maryland and Denise Wheeler, Administrator, Citizen Review Board for Children.

On September 6, 2023, CRBC staff presented Understand ACEs training to Maryland Department of Public Safety and Correctional Services Programs, Treatment & Re-Entry Services staff to raise awareness of ACES and CRBC among Department of Correction Staff.

Meetings and Advocacy

CRBC's priorities remains the safety and well-being of Maryland's most vulnerable children and youth. In FY2023, CRBC facilitated virtual meetings with local department of social services administrators in Allegany County, Baltimore City, Baltimore County, Caroline County, Harford County, Prince George's County for individual and jurisdictional advocacy. CRBC advocated for resources and support for children and youth, child welfare staff, caregivers and providers and also participated in virtual meetings with members of the Department of Human Services, Social Services Administration regarding health and education. Meetings with the Department of Human Services and Social Services Administration staff were held during fiscal year 2021-2022 and in the first half of fiscal year 2023 to discuss CRBC health findings and concerns regarding health and educational oversight and services. Discussions included the lack of shared health and education information and

documentation, the potential impact on case management, planning, decision making, placement stability and permanency. Advocacy efforts included safety, well-being, placement resources for youth with intensive needs, child welfare workforce, DHS policy and practices in addition to vacant child welfare positions and workforce development.

01/25/23 - Prince George's County Director's Meeting

Discussion included concerns regarding repeated lack of reasonable efforts findings against Prince George's County by the juvenile court, quality of services and accountability in addition to challenges regarding child welfare staff, turnover and corrective actions taken.

Prince George's County efforts regarding health and education:

<u>Education</u> -There is an Educational Specialist, Paris Brown who advocates for the educational needs of children and youth. This is a merit position and funded by the county. The Department has a new partnership with CASE (The Council for the Advancement and Support of Education).

<u>Health</u> - Working with the Health Accreditation Committee and the DHS Continuous Quality Improvement (CQI) to address health concerns raised. There is difficulty getting documentation for younger children entering care with preexisting conditions. No documentation

(health forms) no longer required for youth 18-21 per SSA. However, Prince George's County continues to encourage youth to obtain documentation and report getting more because of utilizing incentives for the documentation.

2/27/23-Harford County Director's Meeting

Introductory Meeting with Cora Grishkot, Director who was appointed in April 2022 with Harford County Board Chair Pamela Dorsey, and members Paula Fleet, Manolya Bayar and Quentin Seadler. The Department reported continuing to have a placement crisis. At the time of the meeting, they reported having their first youth in a hotel. Challenged with identifying programs for youth aging out. There were some immigration concerns discussed. The Department has been faced with a small number of unaccompanied or undocumented youth.

Efforts toward aging out youth and resources for youth include:

Received a grant from Compass for youth aging out to do enhanced case management. The Department does not have a lot of resources for unaccompanied or undocumented youth.

3/20/23-Quarterly Baltimore City Director's Meeting

Discussed the departments work toward sources for behavioral and mental health support, resources and staffing to support the work. There continues to be a placement crisis, challenges with health

documentation and oversight despite dedicated staff and resources within the Department for focusing on health appointments and follow-up.

3/27/23-Baltimore County Director's Meeting

The Department had a 47% vacancy rate at the time of the meeting and was experiencing challenges as a result with increasing caseload and workload including for supervisors and administrators. Despite child welfare staffing challenges, the Department's permanency outcomes for the 2023 fiscal year at the time of the meeting included:

- > 25 adoptions
- > 51 custody and guardianships
- > 53 reunified with family

4/6/23-Caroline County Director's Meeting

This was an introductory meeting w/Director Shari Blades and Administrators/Supervisors Carina Wilt and Heather Ruark.

CPS Investigations

Number of investigative responses has risen 10% since 2021-2022. Referrals have been consistent Screened in referrals have been consistent. Sexual abuse cases have remained consistent Doing more outreach to the community for awareness for prevention and sharing education with children in a child friendly way about body safety. The Department has identified a provider that is educating the community on child abuse. More of instances of family coming to the attention of the Department multiple times.

In Home Services

Addressing substance abuse, housing, and working with families that have increased needs. Substance Use Treatment and Recovery Team-A social worker from the Department is paired with a family peer mentor who has been in recovery 2 years and works intensely with families that have a substance abuse disorder and potentially neglecting their children. The peer mentor is an employee from the health department and been a consistent presence and wants to share their experience. The peer mentor helps parents to identify what their recovery path would look like. The substance has to be the priority (reason for intervention). Mental health has to be addressed before addressing their recovery needs. Funding for the peer mentor comes from SSA and is using Family First Prevention Services. The health department provides supervision as it relates to the role of family peer mentor.

Out of Home Care

Only had 2 older youth (APPLA) and they were exiting within a week. Since 2017 there was an increase of babies coming into care, younger kids, and older. youth. They were able to expedite permanency for younger children. 23 children were in care at the time of the meeting.

Influx of large sibling groups due to parent not being able to manage their substance abuse.

Every youth that has come into care was due to every resource being exhausted. Working with AMP (At keep my Plan) which gives the youth more power over their planning. Note: Caroline, Talbot, Kent, and Queen Anne are participating.

Immigration-Efforts for prevention and community engagement

Building partnerships and they are looking for someone who is bilingual to help work with the families. Exploring the church to be the Hub to work with the families. Utilizing grant funding to help provide needed resources and working with the hospital in the community.

4/10/23-Allegany County Director's Meeting

Unlike most of the local department of social services around the state Allegany County never experienced a significant turnover or challenges with staffing.

At the time of the meeting they were fully staffed. The Department was in need of resource homes. At the time of the meeting they had 27 licensed homes which didn't provide for a lot of flexibility because there were 69 children in care. Eight children were in kinship family placements. The Department was utilizing Families First Prevention funds for Evidence Based Program (EBP), Parent child Interactive Therapy (PCIT) and Multi Systemic Therapy (MST). All are intensive services to provide additional support including peer support. Peer support and crisis staff workers funded by a Substance Abuse and Mental Health Services (SAMHSA) federal grant was in its 3rd year.

Advocacy and Other Meetings

2/3/23-Introductory meeting with Camille Davis-new State CASA Director. Provided an overview of CRBC, discussed history of collaborative work with CASA at the state level and the need for CASA participation (as one of the most important interested parties (IP's) in CRBC reviews.

3/1/23-Meeting with Sarah Bosken, Interim Program Director of Prince George's County CASA at the time of the meeting to discuss out of home placement, services, concerns and needs in Prince George's County and to advocate for increased CASA participation in CRBC reviews.

3/10/23-Meeting w/Paris Brown, Prince George's County Education Specialist regarding her role and advocacy on behalf of children/youth involved with child welfare and in out of home placement, data, services, outcomes and training

CRBC FY2023 Legislative Activities

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

During the 2023 legislative session CRBC reviewed and monitored 127 pieces of legislation, supported 17 with testimony and opposed 3 with testimony.

2023 Legislative Session wrap up

Total monitored: 127

House: 68 Senate: 59 Passed: 46 Stalled: 76 Withdrawn: 5

Monitored w/o action/Abstain: 107

Supported w/ testimony (directly/indirectly w/child welfare advocates/stakeholders) 17 Opposed w/ testimony (directly/indirectly w/child welfare advocates/stakeholders) 3

<u>Advocacy</u>

Goals met/ supported/passed: 10 Goals unmet/ supported/stalled: 7 Goals met/ opposed/stalled: 3

Some advocacy priorities and next steps activities identified included the following:

<u>Out of Home Placements</u> (To address youth in hotels and on hospital overstays)

Maryland does not have a placement option for youth who are extremely difficult to place due to intensive service needs.

<u>Child Welfare Workforce</u> (To address the need for sufficient qualified, competent child welfare workers, to address vacancies and turn over across the state and the trend of decreased interest in child welfare social work and decreased admissions to social work programs. All of which ultimately impacting delivery and quality of services).

<u>Older Youth</u> (To address housing and other transitional services).

<u>Education</u> (To review and follow up with DHS/MSDE Data and advocacy for improved oversight and monitoring)

CRBC Out-of-Home Placement Case Reviews

Targeted Review Criteria

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

Reunification:

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

Adoption:

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

Another Planned Permanent Living Arrangement (APPLA):

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

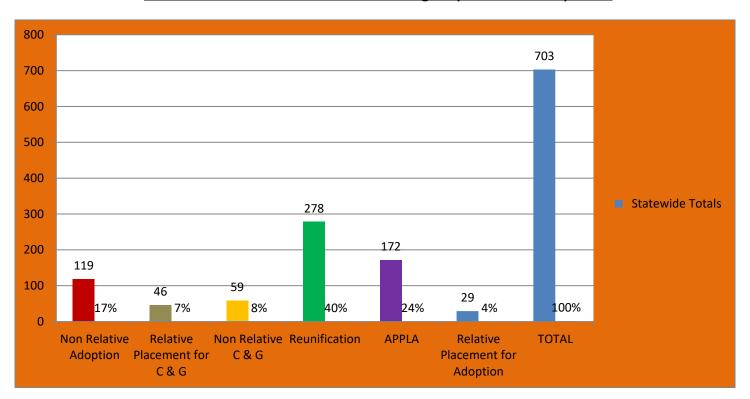
Older Youth Aging Out

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

Re-Review Cases:

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

CRBC FY2023 Case Review Findings by Permanency Plan



Gender Totals (703)

Male	Female
345 (49%)	358 (51%)

ľ	V	al	ما

Non Relative Adoption	Relative Placement for C & G	Non-Relative C & G	Reunification	APPLA	Relative Placement for Adoption
65	23	31	135	78	13
(9%)	(3%)	(4%)	(19%)	(11%)	(2%)

<u>Female</u>

Non Relative Adoption	Relative Placement for C & G	Non-Relative C & G	Reunification	APPLA	Relative Placement for Adoption
54	23	28	143	94	16
(8%)	(3%)	(4%)	(20%)	(13%)	(2%)

Ethnicity Overall (703)

African American	Caucasian	Asian	Native American	Other
397	234	10	1	61
(56%)	(33%)	(1%)	(0%)	(9%)

Age Range by Permanency Plan

[RE] = Reunification

[RA] = Relative Placement for Adoption

[RG] = Relative Placement for Custody & Guardianship

[AD] = Non-Relative Adoption

[CG] = Non-Relative Custody & Guardianship

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

AGE RANGE	RE	RA	RG	AD	CG	AP	Totals
age 1 thru 5	56	18	6	58	4	0	142
age 6 thru 10	79	7	14	35	19	0	154
age 11 thru 13	45	2	8	10	11	0	76
age 14 thru 16	65	1	12	14	18	11	121
age 17 thru 19	33	1	6	2	7	114	163
age 20	0	0	0	0	0	47	47
Totals	278	29	46	119	59	172	703

CRBC FY2023 Case Reviews by Jurisdiction & Permanency Plans

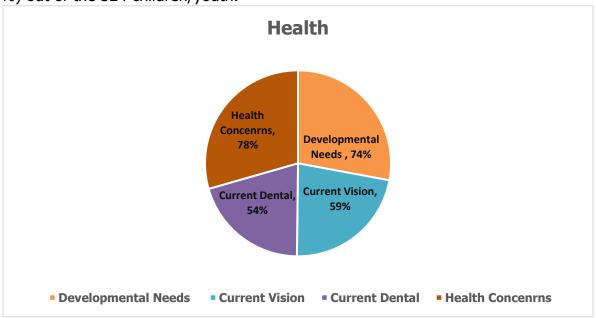
		Non	Relative	Non			Relative Placement		
Jurn #	County	Relative Adoption	Placement for C & G	Relative C & G	Reunification	APPLA	for Adoption	TOTAL	Boards held
01	Allegany	Adoption	IOF C & G	1	9	2	Adoption 1	13	neia
OI	Anne			1	9			13	
02	Arundel	10	2		10	7		29	
02	Baltimore	10			10	,			
03	County	9	2		51	21	2	85	
04	Calvert		1		9	1		11	
05	Caroline	4						4	
06	Carroll	2			3			5	
07	Cecil	2		3	8	3		16	
08	Charles	1	1	1	3	4	1	11	
09	Dorchester			4	3			7	
10	Frederick	10			9	4	2	25	
11	Garrett		1	1	2			4	
12	Harford	9	1		13	9		32	
13	Howard	7			2	2		11	
14	Kent				2			2	
15	Montgomery	21	8	5	43	9	7	93	
	Prince								
16	Georges	11	7	11	25	23	2	79	
17	Queen Anne		1			1		2	
18	Saint Mary's	6	1	2	2	3	3	17	
19	Somerset				1	3		4	
20	Talbot	2		1		1		4	
21	Washington	4		2	10	10		25	
22	Wicomico				3	4		7	
23	Worcester					3		3	
	Baltimore								
49	City	21	21	33	70	62	11	214	
	Statewide	4.4.5				4-5			
	Totals	119	46	59	278	172	29	703	
	Percentages	17%	7 %	8%	40%	24%	4%	100%	

CRBC conducted a total of 703 individual out-of-home case reviews.

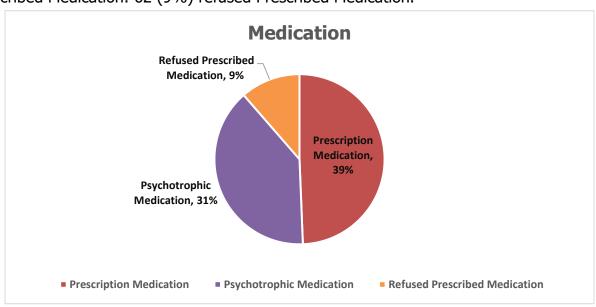
• The local Boards agreed with the permanency plan for 588 of the cases reviewed.

Health

- Current Physical: 517 (74%) out of the 703 children/youth had current physical.
- Developmental Needs: 517 (74%) out of 703 children/youth had developmental needs.
- Current Vision: 414 (59%) out of 703 children/youth had current vision.
- Current Dental: 381 (54%) out of 703 children/youth were current on Dental Exams.
- Health Concerns: The local department ensured that appropriate follow-up occurred on 253 (78%) out of the 324 children/youth.

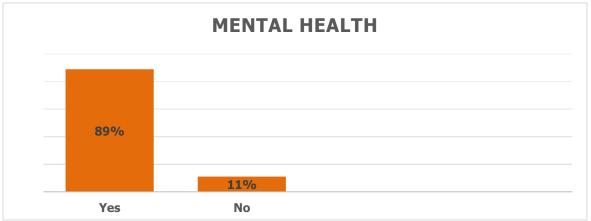


- Prescription Medication: 275 (39%) out of 703 children/youth were on Prescription Medication.
- Prescription Medication Monitored: Prescription Medication was regularly monitored for 269 (98%) out of 275 children/youth.
- Psychotropic Medication: 215 (31%) out of 703 children/youth were on Psychotropic medication.
- Psychotropic Medication Monitored: Psychotropic Medication was monitored at least on a quarterly basis for 217 (31%) out of the 703 children/youth.
- Prescribed Medication: 62 (9%) refused Prescribed Medication.



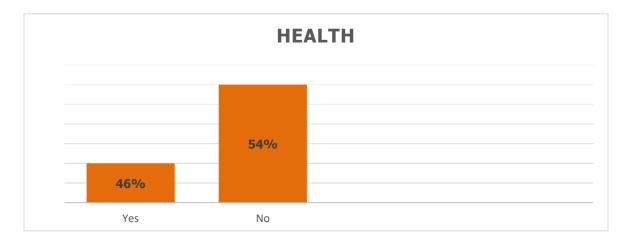
- Mental Health: 437 (62%) out of the 703 youth/children had mental health issues.
- Mental Health Diagnosis: 443 (63%) out of the 703 youth/children had a mental health diagnosis.

The Local Boards agree that the Mental Health Issues were addressed for 387 (89%) out of the 437 youth/children.



- 112 (91%) out of the 123 children/youth who were transitioning and were identified as having a Mental Health Issue has an identified plan to obtain services in the adult mental health care system.
- Standard Health Exams: 33 (5%) out of the 703 youth/children refused to have a standard exam.
- Completed Medical Records: 284 (40%) out of the 703 youth/children had completed medical records.

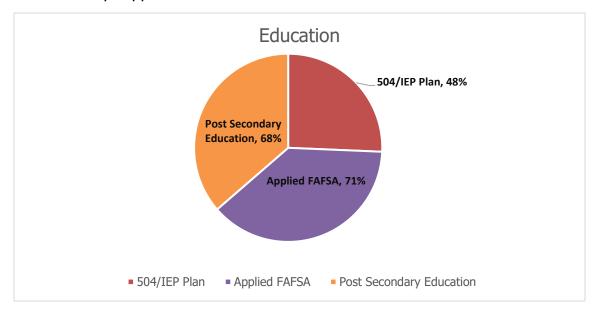
The Local Boards agree that the health needs for 322 (46%) out of the 703 youth/children were met.



Education

• 244 (48%) out of the 505 youth enrolled in school had a 504 or IEP plan.

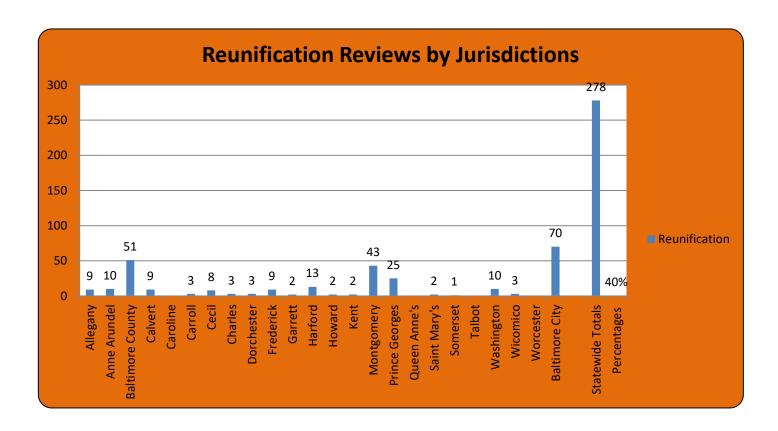
- A current progress report card was available to review for the 249 of the youth enrolled in school.
- 68 (60%) out of the 113 youth had concrete plans for post-secondary education.
- 33 (71%) of the youth pursuing higher education were found to have applied for FAFSA.
- 45 (20%) out of 222 youth that were disabled and exiting school were aware of and engaged with community supports.



Local Boards agreed that 441 (79%) out of 557 youth were being appropriately prepared to meet their educational goals.

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. Forty percent of the cases reviewed had a permanency planning goal of reunification.



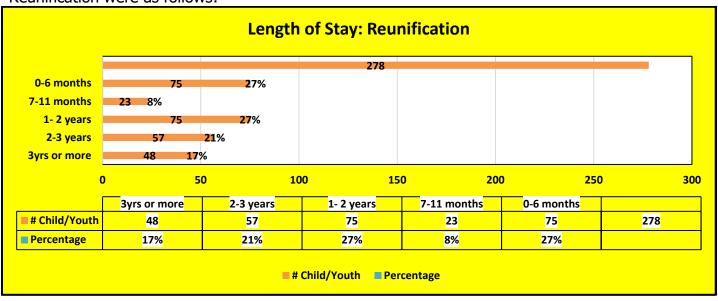
Age Range	Statewide Totals	Reunification	Percentage
Age 1 thru 5	142	56	39%
Age 6 thru 10	154	79	51%
Age 11 thru 13	76	45	59%
Age 14 thru 16	121	65	54%
Age 17 thru 19	163	33	34%
Age 20	47	0	0%
Total	703	278	30%

<u>Permanency</u>

The local boards agreed with the permanency plan of reunification for 176 (63%) of the 278 cases reviewed.

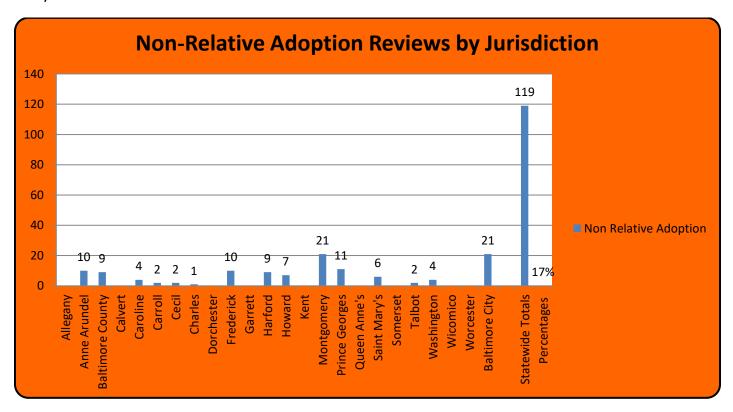
Length of Stay for Children/Youths with a plan of Reunification

The local boards found that the lengths of stay for the 278 children/youths with a plan of Reunification were as follows:



Non-Relative Adoption Case Reviews

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



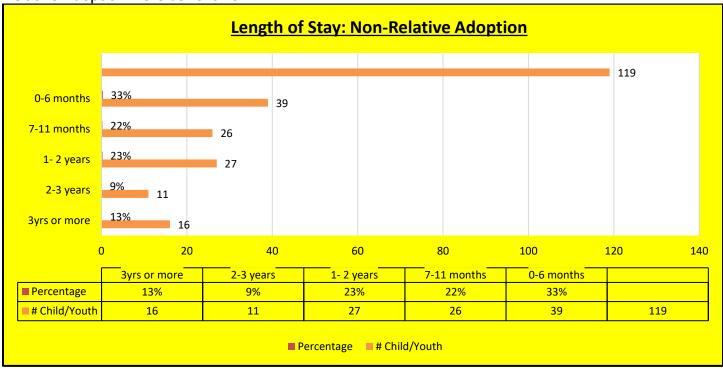
Age Range	Statewide Totals	Adoption	Percentage
Age 1 thru 5	142	58	41%
Age 6 thru 10	154	35	23%
Age 11 thru 13	76	10	13%
Age 14 thru 16	121	14	12%
Age 17 thru 19	163	2	1%
Age 20	47	0	N/A
Total	703	119	17%

Permanency

The local boards agreed with the permanency plan of Non-Relative Adoption for 118 (99%) of the 119 cases reviewed.

Lengths of Stay for Children/Youths with a plan of Adoption

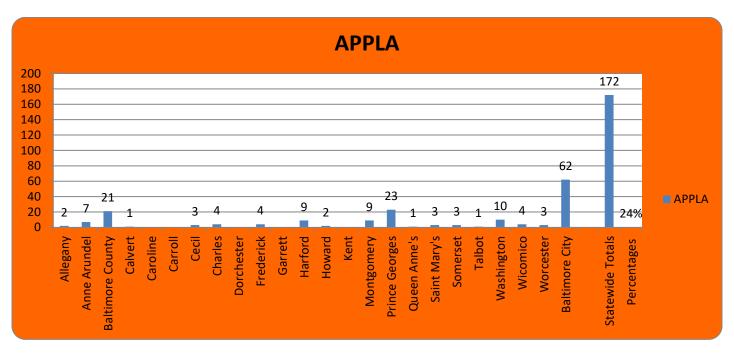
The local boards found that the lengths of stay for the 80 children/youths with a plan of Non-Relative Adoption were as follows:



<u>APPLA Reviews</u> (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 703 cases reviewed, 172 (24%) of the cases had a plan of APPLA. Baltimore City had the most cases at 62 (36%), Prince George's County 23 cases (13%), Baltimore County 21 cases (12%), Montgomery County 9 cases (5%), Washington County 10 cases (6%), Anne Arundel County 7 cases (4%), Charles County 4 cases (2%) and Cecil County 3 cases (2%).



Age Range	Statewide Totals	APPLA	Percentage
Age 1 thru 5	142	0	N/A
Age 6 thru 10	154	0	N/A
Age 11 thru 13	76	0	N/A
Age 14 thru 16	121	11	9%
Age 17 thru 19	163	114	70%
Age 20	47	47	100%
Total	703	172	24%

<u>Permanency</u>

The local boards agree with the permanency plan of APPLA for 170 (99%) of the total cases reviewed.

• 161 reviews with the plan of APPLA, the youths were between the ages of 17 and 20.

Length of stay Child/Youth had a plan of APPLA

The local boards found that the lengths of stay for children/youths with a plan of APPLA were as follows:

- 55 (32%) of the youth were in care for 1-2 years
- 33 (19%) of the youth were in care for 2-3 years
- 14 (8%) of the youth were in care for 3 years or more

Ready by 21

Independent Living Services

- 169 (51%) youths received appropriate services to adequately prepare for independent living when they leave out of home care.
- 168 (51%) of the youths completed a Life Skills Assessment.
- 163 (49%) of the youths received required independent living skills.

The Local Boards agreed that 161 (49%) of the youth received appropriate Independent Living Skills to prepare for transition to successful adulthood.

Employment (Age 14 and Older)

- 111 (34%) of youth participated in paid or unpaid work experience.
- 100 (33%) of 330 youth participated in paid or unpaid work relevant to career field of choice.
- 151 (46%) of youth were referred by caseworkers to summer or year round training and employment opportunities.
- 31 youths were identified as being 20 years old and earning a living wage.

The Local Boards agreed that in 166 cases that the child/youth was bring appropriately prepared to meet employment goals.

Housing (20 and with APPLA only)

• 34 (72%) out of the 47 youth who were transitioning out of care had specified housing.

The Boards agreed with the transitional housing plan for all 34 youths.

The Boards agreed that 35 (74%) out of the 47 youth are appropriately prepared for transitioning out of care.

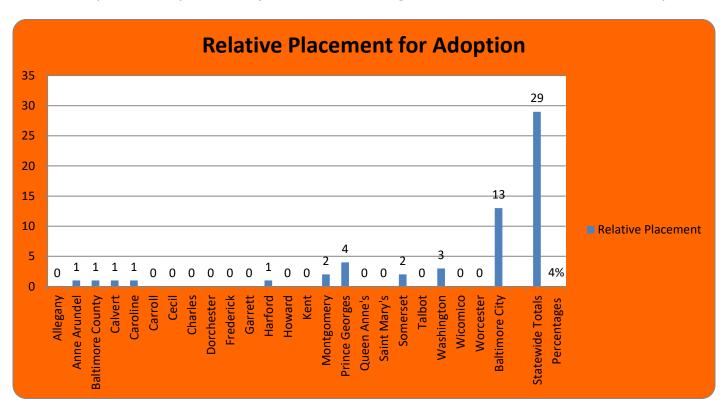
Permanent Connections (APPLA only)

The LDSS identified 155 (90%) out of the 172 cases reviewed as a permanent connection for the child.

The Boards agreed that the identified permanent connection was appropriate for 151 (89%) of the cases.

Relative Placement for Adoption Case Reviews

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



Category of Relative Placement

• Relative Placement for Adoption: 29 cases

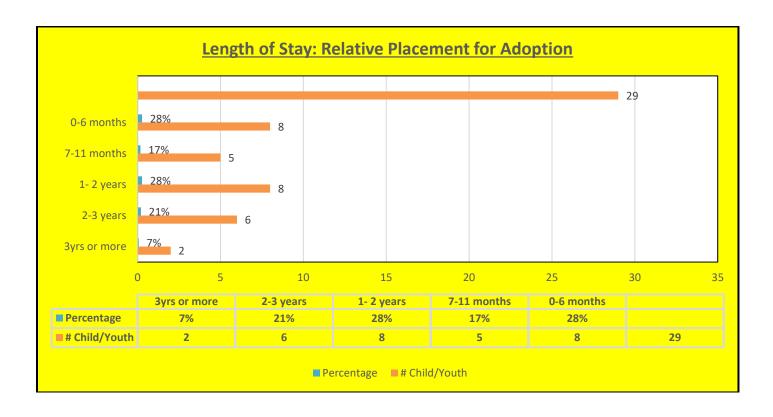
Age Range	Totals	Relative Placement	Percentage
Age 1 thru 5	142	18	13%
Age 6 thru 10	154	7	5%
Age 11 thru 13	76	2	3%
Age 14 thru 16	121	1	1%
Age 17 thru 19	163	1	2%
Age 20	47	0	<1%
Total	703	29	4%

<u>Permanency</u>

The local boards agreed with the permanency plan of relative placement for 27 (93%) of the 29 cases reviewed.

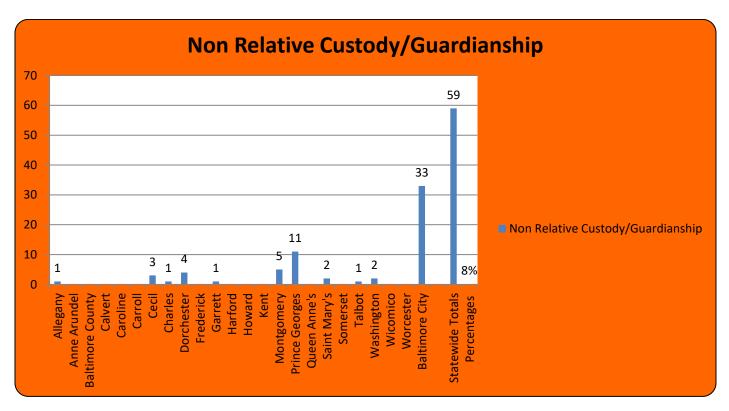
Lengths of Stay for Children/Youth with a plan of Relative Placement for adoption

The local boards found that the length of stay of the 29 children/youths with a plan of Relative Placement for Adoption were as follows:



Non-Relative Custody/Guardianship Reviews

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



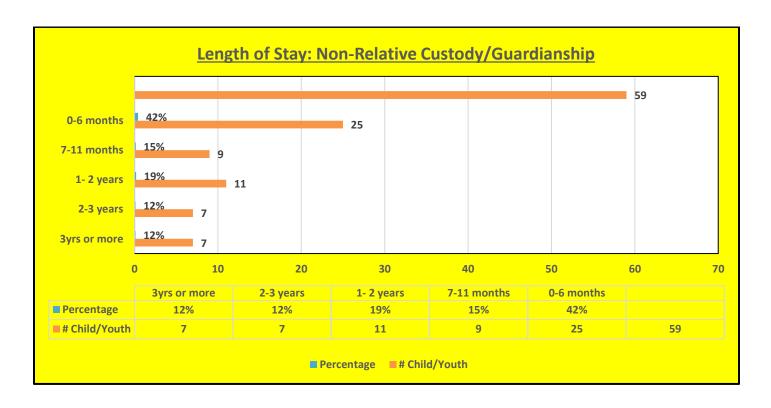
Age Range	Statewide Totals	Custody/Guardian	Percentage
Age 1 thru 5	142	4	3%
Age 6 thru 10	154	19	12%
Age 11 thru 13	76	11	14%
Age 14 thru 16	121	18	15%
Age 17 thru 19	163	7	4%
Age 20	47	0	<1%
Total	703	59	8%

<u>Permanency</u>

The local boards agreed with the permanency plan of Non-Relative Custody/Guardianship for 56 (95%) of the 59 cases reviewed.

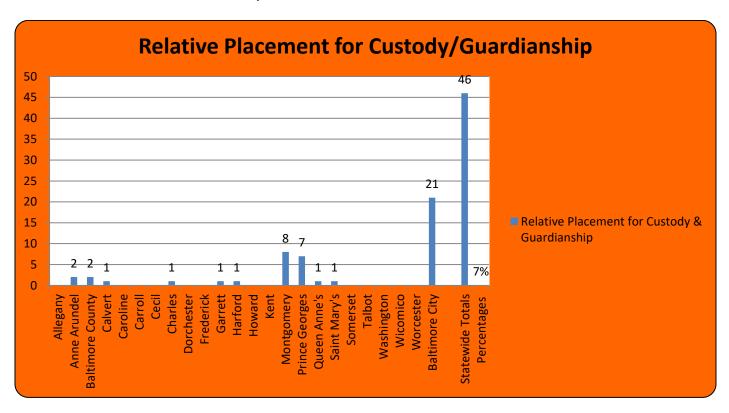
Lengths of Stay for Children/Youths with a plan of Non-Relative Custody/Guardianship

The local boards found that the lengths of stay of the 59 children/youths with a plan of Non-Relative Custody/Guardianship were as follows:



Relative Placement for Custody/Guardianship

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



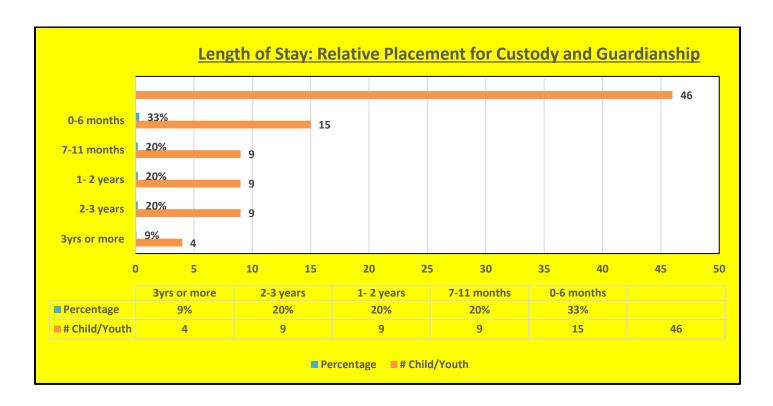
Age Range	Statewide Totals	Relative Placement Custody/Guardian	Percentage
Age 1 thru 5	142	6	4%
Age 6 thru 10	154	14	9%
Age 11 thru 13	76	8	11%
Age 14 thru 16	121	12	10%
Age 17 thru 19	163	6	4%
Age 20	47	0	<1%
Total	703	46	7%

<u>Permanency</u>

The local boards agreed with the permanency plan of Relative Custody/Guardianship for 41 (89%) of the 46 cases reviewed.

Lengths of Stay for Children/Youths with a plan of Relative Custody/Guardianship

The local boards found that the lengths of stay of the 46 children/youths with a plan of Relative Custody/Guardianship were as follows:



Summary

Based on the findings of the review, the local boards determined that the local Department of Social Services made adequate progress towards a permanency plan (COMAR - 07.01.06.05 (F)) for 585 (83%) of the 703 total cases reviewed.

Montgomery County Citizens Review Panel

December 22, 2022

The Montgomery County Citizens Review Panel has continued to meet monthly throughout FY2022. The Panel has consisted of between 6-8 active members and the Panel continues to work with the County to recruit additional Panel members.

Current Panel Members:

Stacey McNeely (Chair) Laura Coyle Laura Brown Ronald Whalen Kay Farley Shaoli Katana

(We recently had two members whose terms expired: Katy Dunn and Marci McCoy Roth)

Agenda items that the Panel has focused on:

- Recruitment and Retention of Resource (Foster) Parents
- LGBTQ Foster Youth: services available to youth and young adults
- Recruitment and Retention of Resource Homes:
 - The Panel began an assessment of this SSA policy issue by reviewing two prior CWS Resource Home surveys and established its own survey, asking Child Welfare staff to complete.
 - The Panel reviewed the staff's responses and developed a summary.
 - The Panel will be discussing the summary in an effort to identify areas for follow up and further review.

Increase Panel focus:

- This includes working with the State Citizens Review Board for Children (CRBC) for background and resource materials to new Panel members, invitations to new Panel members to CRBC's preservice training sessions, and invitations to all Panel members to all CRBC's in-service training sessions.
- The Panel is also increasing awareness of potential opportunities to collaborate with other County panels, boards and commissions in areas of overlapping interest.

CRBC FY2023 State Board

Nettie Anderson-Burrs (Chair)
Circuit 4: Representing Allegany, Garrett, and Washington Counties

Delores Alexander (Vice Chair)
Circuit 3: Representing Baltimore and Harford Counties

Dr. Theresa Stafford Circuit 1: Representing Dorchester, Somerset, Wicomico, and Worchester Counties

sircult 1. Representing Dorchester, Somerset, Wicomico, and Wortnester

Vacant

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

Vacant

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

Sandra "Kay" Farley
Circuit 6: Representing Frederick and Montgomery Counties

Davina Richardson

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

Beatrice Lee

Circuit 8: Representing Baltimore City

Rita Jones

Circuit 8: Representing Baltimore City

Benia Richardson

Circuit 8: Representing Baltimore City

Denise E. Wheeler CRBC Administrator

CRBC FY2023 Members*

Linda Crites	Tara Wooster	Kathleen Johnston
Jennifer Roberts	Aaron Buchsbaum	Mollie Haines
Margaret Mattson	Charmayne Anderson	Jacalyn Blackwell-White
Bonnie Leatherman	Susan Schor	Analynn Redding
Marlene Beckman	Nathaniel Wallace	Veronica Cosby
Amy Potler	Patrick Hickson	Judith Chambers

^{*}New members appointed by the Governor in FY2023

CRBC Staff Members

Denise E. Wheeler Administrator

Crystal Young, MSW Assistant Administrator

Hassan Aslam Information Technology Officer

Hope Smith IT Functional Analyst

LeShae Harris Office Clerk II

Michele Foster, MSW Child Welfare Specialist

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

Nikia Greene Child Welfare Specialist

Sandy Colea, CVA Volunteer Activities Coordinator Supervisor

> Lakira Whitaker, Volunteer Activities Coordinator II

> > Agnes Smith Executive Assistant

Cindy Hunter-Gray Lead Secretary

References

Citizens Review Board for Children (2013). Policy and Procedures Manual. Baltimore, MD: Department of Human Services (formerly Dept. of Human Resources).

COMAR 07.01.06.05. Procedures for Conducting the Citizen Review of Out-of-Home Placement. Title 07 Department of Human Services (formerly Dept. of Human Resources).

COMAR 07.02.11.01. Purpose of Out-of-Home Placement Program. Title 07 Department of Human Services (formerly Dept. of Human Resources).

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

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

COMAR 07.02.12.04. Post Adoption Services. Title 07 Department of Human Services (formerly Dept. of Human Resources),

Maryland Code, Family Law § 5-539

Maryland Code, Family Law § 5-545

Maryland Department of Human Resources (FY2015). State Stats. Place Matters Statewide Summary Department of Human Services (formerly Dept. of Human Resources).

Social Services Administration (2016). Out of Home Placement Services – Ready By 21 Manual (FY2017 Edition). Baltimore, MD: Department of Human Services (formerly Dept. of Human Resources).

Social Services Administration cw#16-10 (September 15th, 2015). Another Planned Permanent Living Arrangement (APPLA). Baltimore, MD: Department of Human Services (formerly Dept. of Human Resources).

Social Services Administration cw#14-17 (April 15, 2014). Oversight and Monitoring of Health Care Services. Baltimore, MD: Department of Human Services (formerly Dept. of Human Resources).

Social Services Administration (2010). Out of Home Placement Program Manual. Baltimore, MD: Department of Human Services (formerly Dept. of Human Resources).

Social Services Administration cw#10-08 (August 14, 2009). Family Involvement Meetings (FIM). Baltimore, MD: Department of Human Services (formerly Dept. of Human Resources).