

THE OFFICE OF GOVERNOR WES MOORE

GOVERNOR'S OFFICE FOR CHILDREN

FY 2025 State of Maryland Out-of-Home Placement and Family Preservation Resource Plan

*2024 Joint Chairmen's Report - FY 2025 Operating and Capital Budgets
(Pages 289-290)*

Wes Moore
Governor

Aruna Miller
Lt. Governor

Carmel Martin
Special Secretary
Governor's Office for Children

Submitted by: Christina Drushel Williams
Governor's Office for Children

Contact: christina.drushel@maryland.gov

January 16, 2025

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The Honorable Chair Guy Guzzone
Senate Budget and Taxation Committee
Miller Senate Office Building, Suite 3 West
11 Bladen Street
Annapolis, MD 21401

The Honorable Chair Benjamin Barnes
House Appropriations Committee
House Office Building, Room 121
6 Bladen Street
Annapolis, MD 21401

RE: Report required by the 2024 Joint Chairmen's Report (Pages 289-290) - FY 2025 State of Maryland Out-of-Home Placement and Family Preservation Resource Plan

Dear Chairs Guzzone and Barnes:

In accordance with the 2024 Joint Chairmen's Report - FY 2025 Operating and Capital Budgets (Pages 289-290), please find an enclosed copy of the Governor's Office for Children, the Department of Human Services, the Department of Juvenile Services, the Maryland Department of Health, and the Maryland State Department of Education's joint report, titled *FY 2025 State of Maryland Out-of-Home Placement and Family Preservation Resource Plan*. The report includes information on out-of-home placement trends, children's needs in Maryland, and agency initiatives that address those needs.

Until the report is submitted, the 2024 Joint Chairmen's Report - FY 2025 Operating and Capital Budgets (Pages 289-290) restricts \$400,000 of the general fund appropriation (\$100,000 for the Department of Human Services Social Services Administration, \$100,000 for the Department of Juvenile Services, \$100,000 for the Maryland Department of Health Developmental Disabilities Administration, and \$100,000 for the Maryland State Department of Education). With submission of the report, the Governor's Office for Children, the Department of Human Services, the Department of Juvenile Services, the Department of Health, and the Maryland State Department of Education respectfully request the release of restricted funds. Should you have any questions relating to the information provided, please feel free to email christina.drushel@maryland.gov.

Sincerely,
Carmel Martin
Special Secretary

**cc: President William C. "Bill" Ferguson IV
Speaker Adrienne A. Jones
Sarah Albert, Department of Legislative Services (5 copies)**

Contributing Parties

The following individuals and agencies provided invaluable assistance with this *FY 2025 State of Maryland Out-of-Home Placement and Family Preservation Resource Plan* (Report):

Department of Health

Laura Herrera Scott, MD, MPH, Secretary

Susan Bradley, Behavioral Health Administration

susan.bradley@maryland.gov

Janet Furman, Developmental Disabilities Administration

janet.furman@maryland.gov

Seung Kim, Developmental Disabilities Administration

seung.kim@maryland.gov

Laura Torres, Behavioral Health Administration

laura.torres1@maryland.gov

Department of Human Services

Rafael López, Secretary

Carnitra White, Principal Deputy Secretary

Heather Zenone, Assistant Secretary for Policy

Dr. Alger Studstill Jr., Social Services Administration

alger.studstill@maryland.gov

Tennille Thomas, Social Services Administration

tennille.thomas2@maryland.gov

Angelique Salizan, Social Services Administration

angelique.salizan@maryland.gov

Maria Tillman, Social Services Administration

maria.tillman@maryland.gov

Keisha Peterson, Social Services Administration
keisha.peterson1@maryland.gov

Harry Morgan, Social Services Administration
harry.morgan1@maryland.gov

Department of Juvenile Services
Vincent Schiraldi, Secretary

Kara Aanenson, Legislation, Policy and Reform
kara.aanenson@maryland.gov

Michael DiBattista, Fiscal Planning and Management
michael.dibattista@maryland.gov

John Irvine, Research and Evaluation
john.irvine@maryland.gov

Fang Qian, Research and Evaluation
fang.qian@maryland.gov

Governor's Office for Children
Carmel Martin, Special Secretary

Andrea Barnes, Policy Advisor
andrea.barnes@maryland.gov

Tracey Webb, Grants and Data Manager
tracey.webb@maryland.gov

Christina Drushel Williams, Director of Community Initiatives
christina.drushel@maryland.gov

Governor's Office of Crime Prevention and Policy
Dorothy Lennig, Executive Director

Briana Irwin, MSAC Analyst
briana.irwin1@maryland.gov

Nathan Kemper, Director, Maryland Statistical Analysis Center
nathan.kemper@maryland.gov

Rachel Kesselman Leonberger, Research and Analysis
rachelm.kesselman@maryland.gov

Jennifer Krabill, Deputy Director, Juvenile Justice Division
jennifer.krabill@maryland.gov

Maryland State Department of Education
Carey M. Wright, Ed.D., State Superintendent

Carmen Brown, Division of Early Intervention and Special Education Services
carmen.brown1@maryland.gov

Mary Gable, Division of Student Support and Federal Programs
mary.gable@maryland.gov

Jeff Miller, Division of Early Intervention and Special Education Services
jeffrey.miller1@maryland.gov

Sheila Philip, Division of Early Intervention and Special Education Services
sheila.philip@maryland.gov

Tiffany Wagoner, Division of Early Intervention and Special Education Services
tiffany.wagoner@maryland.gov

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Executive Summary

Pursuant to the [2024 Joint Chairmen's Report - FY 2025 Operating and Capital Budgets \(Pages 289-290\)](#), the Governor's Office for Children, in coordination with child-serving agencies, prepared this report and a publicly available [data dashboard](#) to document the State's capacity for and utilization of out-of-home placements, analyze the costs associated with out-of-home placements, facilitate an evaluation of statewide family preservation programs, and identify areas of need across Maryland.¹

For the purpose of this report, child-serving agencies provided "served data" for FY 2024 (July 1, 2023 - June 30, 2024). Served data includes all cases that were open at the beginning of the month as well as new cases that were opened during the month. The served data accounts for all children served in out-of-home care regardless of the removal end date. Note that the data reported in the dashboard is static and represents the data on the day it was extracted; action with respect to placements subsequent to that date will not be represented. Using this information, the Governor's Office for Children and child-serving agencies identified the following highlights pertaining to the requirements for this Report (*as listed below*):

- 5,730 youth experienced at least one out-of-home placement in FY 2024. This represents a continued downward trend from 6,084 youth in FY 2023; 6,381 in FY 2022, and a high of 7,743 youth who experienced a placement in FY 2019.
- 12,918 different placements were made across all child-serving agencies in FY 2024, compared to 14,610 in FY 2023.
- The average number of days a youth spent in placement decreased from 227.23 in FY 2023 to 211.58 in FY 2024. The average daily single-bed cost was \$449 in FY 2024, an increase from \$388 in FY 2023.²
- 292 youth were placed out-of-state at some time in FY 2024, compared to 278 youth in FY 2023. The majority of youth placed out-of-state were placed in a family home.
- The percentage of youth going out-of-state for a hospitalization or non-community based placement continues to decline, but remains approximately 33% of all youth experiencing an out-of-state placement.
- Children in need of an out-of-home residential placement were placed within their home county 49.5% of the time in FY 2024, compared to 46.9% in FY 2023. The counties with the lowest rate of in-county placements were Talbot and Somerset.

¹ Amendments to the content of this report may be submitted at the request of a contributing agency.

² The financial data in the dashboard does not include costs for hospitalizations. Specific hospital costs could not be obtained at the time this Report was drafted.

- There were 866 total placements classified as “Other Placements” in FY 2024. Other placement is defined as individual episodes of youth who have been on runaway status and/or were not in their assigned placement.

This report and corresponding data dashboard identify the program and service needs for Maryland youth and the strategies each child-serving agency will employ in FY 2025 to develop those resources. Given the importance of data to inform decisions, this report also includes screenshot images of the interactive data dashboard to view the most relevant data. Community resource development and out-of-home placement diversion remain a top priority for all child-serving agencies.

Information on residential child care programs required by Human Services Article § 8-703 previously reported in the Out-of-Home Placement report, can now be found in the State Resource Plan, produced by the Department of Human Services.

For more information regarding out-of-home placements, out-of-state placements, one-day counts, and costs associated with out-of-home placements, please refer to the [Appendix](#). To view the publicly available dashboard and its interactive capabilities, please visit <http://goccp.maryland.gov/data-dashboards/out-of-home-placement-dashboard/>.

Introduction and Overview

In accordance with the 2024 Joint Chairmen's Report - FY 2025 Operating and Capital Budgets (Pages 289-290), this Report serves to document placement trends in Maryland, highlight children’s needs, and identify agency initiatives that meet these needs. It also includes strategies for FY 2025 to improve support offerings for children in the State. For more information regarding the data trends and/or the role of each child-serving agency, please refer to the Agency Roles section below.³

The Children’s Cabinet remains committed to providing upstream resources that prevent further system involvement and placement out of home in Maryland and out of state. During FY 2024, the agencies invested in programs and initiatives to better support children and their families. The number of youth who experienced an out-of-home placement decreased in FY 2024, a continued trend from recent years. The Children’s Cabinet, re-established along with the Governor’s Office for Children in May 2024, will continue to identify and develop strategies for supporting youth at risk of out-of-home placement and their families.

³ It is important to note that each agency uses different terminology to define the types of placements available for a youth based on his or her recommended level of care. For this reason, the Report and data dashboard include common terminology that can be used across the agencies for the purpose of consistency and ease of understanding.

Agency Roles

Department of Human Services (DHS): DHS provides a continuum of child and family well-being (child welfare) services in Maryland including: Child Protective Services (CPS), Family Preservation Services (FPS)/In-Home Services, Out-of-Home Care Services, and Adoption Services. As Maryland's child and family well-being agency, DHS serves the largest number of children and youth who experience an out-of-home placement, accounting for approximately 90% of children and youth who experienced at least one out-of-home placement in FY 2024. The functions of DHS child and family well-being services are carried out by Local Departments of Social Services (LDSS) across the 23 counties and Baltimore City.

DHS serves more children through its Family Preservation/In-Home Services programs than it does children who experience an out-of-home placement. Family Preservation/In-Home Services are provided to support families who come to the attention of child protective services or to mitigate risks that would require a child to need an out-of-home placement. DHS assesses the risk level for each family using the Maryland Family Risk Assessment, and services are tailored based on the results of the family version of the Child and Adolescent Needs and Strengths (CANS) assessment. When families actively engage with FPS, data from the FY 2024 review demonstrates continued success in preventing maltreatment and reducing the need for out-of-home placements.

Research shows, time and again, that family connection is essential to our development. Yet here in Maryland, fewer than 1/4 of young people experiencing out-of-home care live with kin. Data and common sense demonstrate that kin can best care for their loved ones. When we apply an evidence and data-based approach to our practice, we will reverse the unacceptable reality that in Maryland, young people who enter out-of-home care as teens are 40% less likely to reunify with family than their peers across the country.

On October 1, 2024, a new kinship law ([Ch. 429 of 2024](#)) went into effect to help guide DHS' investment in kin, along with out-of-home licensing regulations that meet the unique needs of kinship caregivers. In December 2024, DHS kicked off a kin-first approach to Maryland's out-of-home care practice; an approach that centers young people's family relationships, whether by blood or by choice. This new kin-first approach is called "Family Matters."

Department of Juvenile Services (DJS): DJS is Maryland's second-largest youth-placing agency. DJS is responsible for managing, supervising, and treating youth involved in the juvenile justice system. Objective screening and assessment tools guide placement recommendations to the court, which retains ultimate authority over whether youth are placed out-of-home.

In 2022, the Maryland General Assembly limited courts' ability to place youth adjudicated delinquents for misdemeanor offenses into out-of-home placements, except in cases involving

handgun-related offenses. In 2024, the General Assembly expanded this exception to include additional handgun-related offenses, making youth charged with these offenses eligible for detention.

DJS continues to focus on expanding community-based alternatives to provide courts with options other than out-of-home placements. The Department received additional funding in the FY 2025 budget to support the statewide expansion of services. These enhanced services aim to:

- Divert youth from future system involvement, and
- Offer community-based alternatives in lieu of out-of-home placements.

Through these efforts, DJS remains committed to providing effective, community-centered interventions that promote rehabilitation and reduce reliance on detention.

Maryland Department of Health (MDH): MDH is not a placement agency for behavioral health; however, it funds placements in Residential Treatment Centers (RTCs) through Medicaid. Additionally, the MDH Healthcare System operates two RTCs: The Regional Institute for Children and Adolescents Baltimore (RICA Baltimore) located in Baltimore, Maryland and the John L. Gildner Regional Institute for Children and Adolescents (JLG RICA) located in Rockville, Maryland. Both RICAs serve children and adolescents in a residential setting who are experiencing emotional, behavioral, and learning difficulties. Historically, the majority of the work done by the Behavioral Health Administration (BHA), in the context of this Report, stems from building out a macro-level service array to lower the need for out-of-home placements - both inpatient and residential settings (PRTF/RTC).

Beginning in FY 2022, MDH obtained additional financial and personnel resources to address the challenges of youth residential bed capacity that were exacerbated by COVID. In late FY 2022 and early FY 2023, MDH began the realignment of Medicaid funded RTC base rates and the development of a tiered system intended to support providers to take on the highest complexity needs of youth and to ensure the sustainability of those programs.

In FY 2023, MDH also led several expansion projects, to include the development of an inpatient bedboard, known as the bed registry and referral system (BRRS), to better identify available inpatient beds (reducing Emergency Department or ED overstay), the establishment of the 211P4 care coordination process designed to assist with the identification of community resources in support of those youth in ED overstay, and staff resources to focus on identifying solutions regarding youth in an inpatient or ED setting who are unable to be placed in RTC. Additional funding was allocated towards the development of additional seven (7) high intensity residential level beds at Brook Lane, with utilization of these beds beginning summer 2024.

In FY 2024, Medicaid funded 144 placements in RTCs for youth who were not under the care of another agency. This represents a 1.15% increase when compared to FY 2023. These youth

remain in the care and custody of their families/guardians, but the local behavioral health agency (LBHA/CSA) is available to provide guidance and support regarding the entire process.

Number of youth	RTC Facility
32	Associated Catholic Charities
5	Chesapeake Treatment Center
8	The Jefferson School
58	Regional Institute for Children & Adolescents (RICA) Baltimore
48	Regional Institute for Children & Adolescents (RICA) Montgomery County
15	Woodbourne Residential Treatment Center

MDH is not a placing agency for youth with intellectual/developmental disabilities and cannot place or fund a youth in an out-of-state placement. However, in-state services are available for youth who meet the Developmental Disabilities Administration (DDA) eligibility criteria and Medicaid Home and Community Based Services (HCBS) waiver eligibility criteria. The youth must qualify through the Maryland Community Pathways Waiver, Community Supports Waiver, or Family Supports Waiver. The Community Pathways Waiver is the DDA's largest Medicaid waiver program, and includes residential services (including both in-home and out-of-home) in addition to non-residential services. The Community Supports Waiver and the Family Supports Waiver offer a wide range of non-residential support services focused on community contexts. These services are meant to support youth and family in their home in an effort to prevent an out-of-home placement or to support a return to home.

Youth over the age of 18 and not in the care and custody of DHS can access licensed group homes for individuals with developmental disabilities in a community-based setting if they meet eligibility and priority criteria as well as waiver eligibility criteria. In FY 2024, DDA funded 49 youth (ages 18-21) in out-of-home placements, 43 of which were community based residential placements and 6 were non community-based placements in State facilities. These placements were supported by 28 community-based providers and two (2) State facilities.

MDH through DDA licenses children's residential group homes for children and youth who

have intellectual/developmental disabilities and children who are medically fragile. These group homes contract with the Department of Human Services(DHS) and the Department of Juvenile Services (DJS) to serve their youth.

Maryland State Department of Education (MSDE): MSDE is not a placing agency; however, it provides oversight, supervision, and direction of the Nonpublic Tuition Assistance Program, which is the State aid program for students placed in nonpublic special education schools through the Individualized Education Program (IEP) process. In FY 2024, 24 youth were placed at a nonpublic residential school through the IEP team process.

In addition, MSDE implements Maryland's Medicaid Home and Community-Based Services (HCBS) Waiver for Children with Autism Spectrum Disorder, also known as the Autism Waiver (AW), which was approved by the Centers for Medicare and Medicaid Services to serve up to 2,950 participants in FY 2024. Administration of the AW is a partnership between MSDE and MDH. MSDE serves as the Operating State Agency and is responsible for the day-to-day implementation of the AW. MDH is the single State Medicaid Agency charged with the administration of Maryland's Medicaid Program, which provides oversight of the AW and the AW Registry/Waitlist.

All AW services are provided through a fee-for-service model, which is reimbursed by Medicaid. Residential habilitation services are community-based residential placements for those youth who cannot live at home because they require highly supervised and supportive environments. In FY 2024, there were 27 AW eligible youth receiving residential habilitation services through an approved AW provider agency. Eligible community-based placements include group homes licensed by DHS or the Office of Health Care Quality within MDH. No youth placed through the AW is in an out-of-state placement.

Family Preservation Services

The Department of Human Services (DHS) provides family preservation services, referred to as in-home services, to children and families at risk of child maltreatment and/or out-of-home placement. Maryland has provided in-home services to children and families since the early 1980s. These services are provided by the Local Departments of Social Services (LDSS). In-home services are evaluated by analyzing a family's risk levels and the rates of maltreatment and out-of-home placements. Risk levels are measured using the Maryland Family Risk Assessment, a tool administered by caseworkers at the start of services, periodically during service delivery, and at case closure. This report provides data on families who received in-home services. However, there are additional in-home services provided through community-based

providers, prevention, and Alternative Response, which were not initially built in the state's child and family well-being information system of record during the launch of the Child, Juvenile, Adult Management System (CJAMS). The current Administration is working to ensure in-home services are captured in CJAMS so that they can be part of future reports.

Maltreatment, defined as child abuse or neglect, is measured by the number of investigations resulting in findings indicating maltreatments. Out-of-home care refers to the temporary living arrangement for children who are unable to live safely with their parents due to abuse or neglect and is measured by the number of children entering such placements. These metrics are analyzed to evaluate maltreatment occurrences in out-of-home care and among children receiving or recently receiving in-home services.

Detailed data below shows the number of children served with in-home services. The categories of in-home services are:

1. Family Preservation Services
 - Consolidated Services
 - Family Preservation Services
 - Services to Families with Children – Continuing
 - Services to Families with Children
2. Interagency Family Preservation Services
 - Interagency Family Preservation Services
 - Interagency Family Preservation Continuing
3. All Other
 - Kinship Navigators
 - Continuing Protective Services

This report contains data from fiscal years 2020 to 2024. The data from previous years was updated to include the "All Other" category, which was not included in prior submissions. The source of this information is CJAMS, the state's information system of record.

Service Counts for Human Services Family Preservation Services

The chart (Figure 1) includes a count of all in-home services provided during the fiscal years 2020-2024, encompassing both new and ongoing cases. Additionally, there is a breakdown of only the new in-home service cases initiated during the fiscal year. The total count for the fiscal year includes all new cases started during the year, and ongoing in-home cases that began before the fiscal year and continued into it.

Figure 1. Families and Children Served and Newly Served: Total In Home Services (including interagency Family Preservation)

Families and Children Served and Newly Served*						
Total In Home Services (including Interagency Family Preservation)						
	All Cases Served during Fiscal Year			New Cases during Fiscal Year		
	Cases	Children	Avg.# Child/Case	Cases	Children	Avg.# Child/Case
FY 2020	4,780	9,983	2	3,586	7,432	2
FY 2021	4,515	9,237	2	3,446	6,882	2
FY 2022	5,390	11,004	2	4,241	8,467	2
FY 2023	5,561	11,326	2	4,463	9,046	2
FY 2024	5,889	12,463	2	4,800	10,094	2
Family Preservation Services						
	All Cases Served during Fiscal Year			New Cases during Fiscal Year		
	Cases	Children	Avg.# Child/Case	Cases	Children	Avg.# Child/Case
FY 2020	4,377	9,138	2	3,288	6,811	2
FY 2021	4,067	8,321	2	3,106	6,181	2
FY 2022	4,632	9,464	2	3,606	7,201	2
FY 2023	4,774	9,748	2	3,843	7,825	2
FY 2024	5,156	11,002	2	4,207	8,936	2
Interagency Family Preservation Services						
	All Cases Served during Fiscal Year			New Cases during Fiscal Year		
	Cases	Children	Avg.# Child/Case	Cases	Children	Avg.# Child/Case
FY 2020	379	806	2	274	583	2
FY 2021	285	588	2	195	405	2
FY 2022	442	916	2	368	757	2
FY 2023	398	877	2	296	655	2

FY 2024	323	725	2	253	538	2
<i>All Other Family Preservation Services (includes Continuing Protective Services / Kinship Navigators)</i>						
	All Cases Served during Fiscal year			New Cases during Fiscal Year		
	Cases	Children	Avg.# Child/Case	Cases	Children	Avg.# Child/Case
<i>FY 2020</i>	24	39	2	24	38	2
<i>FY 2021</i>	163	328	2	145	296	2
<i>FY 2022</i>	316	624	2	267	509	2
<i>FY 2023</i>	389	701	2	324	566	2
<i>FY 2024</i>	410	736	2	340	620	2
<i>*FY2020-2024 data revised</i>						

Between FY 2020 and FY 2024, the number of cases and children participating in Family Preservation Services (FPS) and related programs steadily increased. The upward trend highlights the agency's expanded reach in supporting children through Family Preservation services. Total in-home services cases rose from 4,780 in FY 2020 to 5,889 in FY 2024. The number of new in-home services cases initiated during the fiscal year increased from 3,586 to 4,800 during the same period. Family Preservation Services consistently served the largest number of families each year, increasing from 4,377 to 5,156 cases over five years.

Interagency Family Preservation Services (IFPS), though smaller in scale, fluctuated peaking at 442 cases in FY2022 before declining to 323 cases in FY 2024. A significant decrease occurred in FY 2021 with IFPS cases dropping 28%. Other services, such as Kinship Navigators and Continuing Protective Services saw significant growth starting at 24 cases in FY 2020 and reaching 410 cases in FY 2024. These services are crucial in stabilizing families experiencing stress or crisis and prevent unnecessary out-of-home care placements.

Analysis of Indicated Findings of Child Maltreatment and Out-of-Home Placement Rates

This analysis focuses on the question “Are the lives of children improved by our involvement?” by measuring the occurrence of findings indicating maltreatment and the reduction of out-of-home placements when families participate in family preservation services.

A finding indicating maltreatment means CPS has “credible evidence, which has not been satisfactorily refuted, that child abuse or neglect occurred.”⁴

In Maryland, CPS cases are served through one of two responses: Investigative Response (IR) and Alternative Response (AR). An IR is pursued in higher risk cases. Investigative Response is a traditional investigation that focuses on forensic evidence and results in a formal finding. AR manages low-risk reports of child maltreatment and enables caseworkers to customize an approach meeting families’ specific needs. AR does not result in a formal finding. Most CPS cases in Maryland are effectively served through AR, which reduces the need for intensive services like Family Preservation Services.

The primary goal of in-home services is to provide support for families that decreases the risk of maltreatment, while also ensuring that the children can remain safely at home. Staff work collaboratively with families to stay together even when challenges exist. Despite these efforts, there are instances of child maltreatment that result in out-of-home placement while parents engaged in in-home services. There are also occurrences of repeat maltreatment within 12 months of case closure.

Out-of-home placements typically occur when there is a finding indicating maltreatment and the child’s safety cannot be ensured at home. The date of removal marks the beginning of an out-of-home placement episode.⁵

A small percentage of out-of-home placements, 3.2% as of June 2024, are due to a child's severe medical, mental health, or developmental needs under a Voluntary Placement Agreement (VPA). The proportion of VPAs remained unchanged from the previous year.

The following analysis focuses exclusively on out-of-home placements managed by DHS. While other agencies in Maryland may place or fund out-of-home child placement, this section specifically examines DHS out-of-home placements that involve families who participated in DHS in-home services. Two measures are used to analyze the effectiveness of in-home services in preventing child maltreatment and out-of-home placements:

⁴ COMAR 07.02.26.02

⁵ It should be noted that not all children are removed when an investigation results in a finding indicating maltreatment. Similarly, not all children are in out-of-home placement because an investigation resulted in a finding indicating maltreatment. Removal is based on safety issues alone. For example, if an alleged maltreater is no longer in the home and/or an appropriate safety plan is in place, out-of-home placement may be unnecessary. Additionally, safety is assessed continuously, and removal decisions are made based on the current situation while investigation results generally take up to two months to finalize. Safety issues may require removal without regard to whether an investigation resulted in a finding.

1. Did a Child Protective Services investigation result in a finding indicating maltreatment when a family is participating in in-home services?
2. Did a DHS out-of-home placement occur when a family is participating in in-home services?

For each of these measures, data is analyzed for the time period during which a family participated in services, and for the one-year period after the case is closed. (See overview in the table below).

Measures	During Services Timeframes	Within 1 Year of the Case being Closed Timeframes
The % of cases that resulted in an Child Protective Services investigation with a finding <u>indicating maltreatment</u> when a family participates in Family Preservation Services	For each fiscal year listed, the children newly served in in-home cases during that fiscal year are included, and the observation period for each child is the start of in-home services to the first of either: <ul style="list-style-type: none"> • the in-home service close date; or • 12 months following the start date of in-home services. 	For each fiscal year listed, the children included were newly served during the fiscal year and their in-home case closed within 12 months of the start date of in-home services. In other words, these are the same children as the “During Services” children whose cases closed during the 12-month observation period. The observation period for each child is 12 months, beginning on the close date of in-home services and ending 12 months later.
The % of Family Preservation Cases in which a DHS <u>out-of-home placement</u> was necessary		

Figure 2. Newly Served Family Preservation Cases and Percent of Cases Closed Within 1 Year

Total Newly Served Family Preservation Cases*						
Fiscal Year	Cases			Children		
	Newly Served Cases	Newly-Served & Closed Within 1 Year	% Closed Within 1 Year	Newly-Served Children	Newly-Served & Closed Within 1 Year	% Closed Within 1 Year
FY 2020	3,586	3,374	94%	7,432	6,957	94%
FY 2021	3,446	3,319	96%	6,882	6,562	95%
FY 2022	4,241	4,138	98%	8,467	8,231	97%
FY 2023	4,463	4,334	97%	9,046	8,735	97%
FY 2024	4,800	N/A until FY25		10,094	N/A until FY25	
*FY 2020-2024 data revised						

Figure 2 illustrates the newly served children and percent of family preservation cases closed within one year of opening. The cases are monitored for one year following case closure to assess whether a CPS investigation resulted in a finding indicating maltreatment or a DHS out-of-home placement occurred.

Child Protective Services Investigations Resulting in Findings Indicating Child Maltreatment

During the past five fiscal years, the percentage of children who experienced a Child Protective Service (CPS) investigation that resulted in a finding indicating maltreatment while the family participated in in-home services ranged between 2% in FY 2020 and 3% in FY 2024 (Figure 3). On average since FY 2020, 97% of children who participated in in-home services did **not** experience a maltreatment finding while participating in in-home services. The data demonstrates that in-home services are likely preventing maltreatment findings or further CPS involvement during and after an in-home service period.

Figure 3. Total In-Home Services Number and Percent with Indicated CPS Findings or Out-of-Home Placements within 1 Year

Finding Indicating Maltreatment and Out-of-Home Placement Rates (Total In-Home Cases)								
Total In-Home Cases								
Fiscal Year	Finding Indicating Maltreatment				Out-of-Home Placement			
	During Services		Within 1 Year of Case Closure		During Services		Within 1 Year of Case Closure	
	Percent	Number	Percent	Number	Percent	Number	Percent	Number
FY 2020	2%	236	4%	350	4%	378	1%	135
FY 2021	3%	254	4%	342	4%	380	1%	120
FY 2022	3%	272	4%	464	5%	494	2%	177
FY 2023	2%	248	2%	571	3%	383	1%	160
FY 2024	2%	260	N/A until FY25		3%	325	N/A until FY25	
*FY 2020-2024 data revised								

Within one year of case closure, an average of 4% of children participating in in-home services experienced a finding indicating maltreatment. Since 2020, on average, 96% of children **did not** experience a finding indicating maltreatment for up to one year after case closure. The rate of out-of-home placement while participating in in-home services is also low starting at 4% in FY2020 and maintaining similar rates in later years, while peaking at 5% in FY2022. After case closure, the percentage of cases involving an out-of-home placement were generally low compared to those during services. When in-home services caseloads increase the data is not signalling a corresponding increase in adverse results like findings indicating maltreatment or out-of-home placement. More data is needed but we continue to move in the right direction.

Figure 4. Family Preservation Services

Number and Percent of CPS Findings Indicating Maltreatment and Out-of-Home Care Placements Within 1 Year (includes Interagency/Other)

Finding Indicating Maltreatment and Out-of-Home Placement								
Family Preservation Services								
Fiscal Year	Finding Indicating Maltreatment				Out-of-Home Placement			
	During Services		Within 1 Year of Case Closure		During Services		Within 1 Year of Case Closure	
	Percent	Number	Percent	Number	Percent	Number	Percent	Number
FY 2020	3%	220	4%	320	4%	357	1%	118
FY 2021	3%	230	4%	317	4%	347	1%	105
FY 2022	3%	246	4%	398	5%	438	2%	156

FY 2023	2%	215	5%	515	3%	328	1%	134
FY 2024	2%	247	N/A until FY25		3%	302	N/A until FY25	
Interagency Family Preservation Services								
Fiscal Year	Finding Indicating Maltreatment				Out-of-Home Placement			
	During Services		Within 1 Year of Case Closure		During Services		Within 1 Year of Case Closure	
	Percent	Number	Percent	Number	Percent	Number	Percent	Number
FY 2020	2%	15	4%	29	3%	21	2%	15
FY 2021	2%	10	3%	17	4%	25	2%	11
FY 2022	2%	18	5%	43	4%	35	1%	6
FY 2023	2%	19	2%	35	4%	31	1%	10
FY 2024	1%	4	N/A until FY25		1%	10	N/A until FY25	
All Other Family Preservation Services (includes Continuing Protective Services / Kinship Navigators)								
Fiscal Year	Finding Indicating Maltreatment				Out-of-Home Placement			
	During Services		Within 1 Year of Case Closure		During Services		Within 1 Year of Case Closure	
	Percent	Number	Percent	Number	Percent	Number	Percent	Number
FY 2020	3%	1	3%	1	0%	0	5%	2
FY 2021	4%	14	2%	8	2%	8	1%	4
FY 2022	1%	8	1%	23	3%	21	2%	15
FY 2023	2%	14	3%	21	3%	24	2%	16
FY 2024	1%	9	N/A until FY25		2%	13	N/A until FY25	
*FY 2022-2023 data revised								

Overall, an average of 96% of children participating in family preservation services from FY2020 to FY2024 were able to remain with their families while receiving these services and avoided an out-of-home placement.

When families participate in family preservation services, the percentage of children placed in out-of-home care within one year of case closure ranged from 1% to 2%. In FY2020, 1% of children experienced an out-of-home placement within a year after case closure, which remained consistent in FY2021 and FY2023 and slightly increased in FY2022 to 2%. The percentages suggest that, overall, Family Preservation Services helped reduce out-of-home placement, with up to 99% of families maintaining stability after services ended.

The data for Interagency Family Preservation Services shows a slightly lower range of 1% to 4% of children placed in out-of-home care during services. The percentage of children with a finding indicating maltreatment while participating in family preservation services remained low, ranging from 1% to 2%.

For all other Family Preservation Services, including Continuing Protective Services and Kinship Navigators, the data reflects a lower percentage of children in out-of-home placements during and after participating in in-home services. These services maintained low figures, ranging from 0%-3% year after year, indicating that they provided effective support for children and families, allowing them to stay together without intrusive interventions, such as, a removal from the home through judicial intervention.

Overall, the data highlights the continued success of in-home services in preventing out-of-home placements and reducing the need for CPS involvement. The consistently low percentages of out-of-home care placements and findings with indicated maltreatment during and after services indicates that these programs are effectively helping families stay together.

Summary of DHS Family Preservation Report

In-home services are a critical component of meeting the needs of thousands of children and their families. In FY2024, approximately 12,463 children from 5,889 families received in-home services (Figure 1). The continuum of family preservation services are the foundation for DHS' kin-first culture because the data demonstrates that participating in families preservation services ensure families stay safely together.

Community-based services, such as in-home parenting programs, mental health care, and treatment for substance use disorder are offered in partnership with evidence-based providers. While we strive to connect every family with the right services and focus on community-based options, participation is voluntary, and families can choose not to engage. Maryland's Child, Juvenile, and Adult Management System (CJAMS) was not originally built to track and does not currently track community-based services provided through Alternative Response.

Local Department of Social Services (LDSS) staff continue to collaborate with families to achieve positive outcomes through the Integrated Practice Model and Family Team Decision Meetings. Engaging children, youth, and families is a cornerstone of the DHS practice model, which is further supported by community resources and services. Delivering Alternative Response, Family Preservation services, and other family supports are vital to strengthening families and ensuring children's safety at home.

DHS Path Forward

Through the federally funded Family First Prevention Services Act (Family First), Maryland is on the path to transforming child and family well-being services by preventing out-of-home care and emphasizing family preservation and upstream prevention. Family First seeks to prevent out-of-home care and ensure that children remain safely at home. Family First prevention services must be trauma-informed, evidence-based, and be either an in-home parenting program, a substance use treatment program, a mental health program, or provide kinship navigation services. Family First provides federal funding for Maryland to build a system that improves family and child well-being with family-centered, child-focused, and community-based services.

Throughout FY2024, the Department of Human Services continued advancing the implementation of Family First. Maryland adopted a range of evidence-based and promising practices, expanded existing programs, and built capacity for new initiatives statewide. Eligible children and families are participating in family preservation services such as:

1. Functional Family Therapy (FFT);
2. Multisystemic Therapy (MST);
3. Parent Child Interaction Therapy (PCIT);
4. Healthy Families of America (HFA); and
5. Sobriety Treatment and Recovery Teams (START).

Functional Family Therapy (FFT) is a short-term, evidence-based therapeutic intervention aimed at improving family dynamics and reducing youth behavioral issues by enhancing communication, problem-solving, and emotional support within the family.

Multisystemic Therapy (MST) is an intensive, family-centered treatment aimed at reducing severe behavioral issues in youth by addressing the interconnected factors within their family, school, and community environments.

Parent-Child Interaction Therapy (PCIT) is an evidence-based treatment that improves parent-child relationships and reduces challenging behaviors in young children by coaching parents in positive interaction and discipline techniques.

Healthy Families America (HFA) is a home-visiting program that supports parents and caregivers of young children through personalized guidance and resources to promote child well-being, positive parenting, and family self-sufficiency.

Sobriety Treatment and Recovery Teams (START) are specialized teams that integrate child and family well-being services with substance abuse treatment to support families affected by addiction, helping parents achieve sobriety while ensuring child safety and family stability.

Upstream Prevention

The large number of reports to the child protection hotline that are screened out, unsubstantiated, or include allegations of neglect related to poverty, suggest that many families may benefit from supports that don't involve the intrusion of the child and family well-being system.⁶

Family First provides federal funding to meet specific family needs like treatment for substance use and mental health services that, unaddressed, can reach a crisis point and drive out-of-home care entries. Family First is a philosophical shift in policy that moves a state agency from being solely focused on child and family well-being or child protection, to a child and family well-being system. A child and family well-being system prioritizes needs of children and their families being met in their community of origin without the need for a government agency to be involved or make the referral for services. This approach to services is coined "Community Pathways to Prevention."

The concept of community pathways will allow Maryland to craft a fundamentally different experience for families, especially those who may distrust public entities or consider child protection punitive and threatening. It is a new way to work with trusted partners to empower and strengthen communities to help keep children safe, and to reduce the need for family involvement with child protection agencies.⁷

Maryland CPS screening data shows that 64% of families came to the attention of child and family well-being in 2023 unnecessarily (i.e., reports were ruled out/screened out), resulting in a strain on families and the workforce. An analysis of Maryland's service array, as a result of a recent LDSS survey conducted by the University of Maryland, demonstrated opportunities to expand or implement new services to address key gaps in the upstream service array. By developing a Community Pathway, Maryland can directly address primary drivers of disproportionate child and family well-being involvement (e.g., poverty-related root causes of family instability, youth behavioral health), or gaps in the upstream service array that families often fall through resulting in child and family well-being engagement.

In CY 2025, DHS intends to convene a group of stakeholders to design and implement one or more Community Pathways in Maryland using federal Family First funds.

Overall, Maryland is demonstrating through family preservation services that supportive programming is critical in maintaining family stability. The growth in services between 2020 and

⁶ According to the National Child Abuse and Neglect Data System, about 7 million children are involved in a report to child protection hotlines each year, but nearly half (45.8%) are screened out for not meeting the legal threshold for abuse or neglect. Of the 3.1 million children who are screened in for an investigation or assessment, less than 1 in 5 are confirmed as victims of maltreatment and about three-quarters of those in a confirmed report are victims of neglect. For more information, see: <https://www.acf.hhs.gov/cb/report/child-maltreatment-2020>

⁷ Casey Family Programs Strategy Brief Supportive Communities How are states building community-based pathways to prevention services through Family First? April 2023 See: https://www.casey.org/media/23.07-QFF_SC-Family-First-Community-Pathways-1.pdf

2024, while maintaining high case closure rates in an efficient and timely manner emphasizes the effectiveness of services.

Summary and Statewide Strategies

FY 2024 Highlights

In FY 2024, the child serving agencies employed strategies and targeted improvements to enhance community-based and residential services for children in Maryland. The agencies established new laws, addressed program barriers, launched new programs, expanded resources, and provided training, amongst many approaches to serving children more effectively and efficiently.

DHS is taking a data based approach and has focused its efforts primarily on implementing targeted strategies as a result of undertaking an in-depth analysis of various programs, operations, and data points, such as, refining "other placements" and working with local departments to ensure accurate data entry, that were carried out during FY23. Since that point, DHS continues to audit processes and functions to address both systemic and programmatic barriers in order to improve agency efficiency, service delivery, and engagement with children, youth, and families. The goal of DHS is to keep families together whenever it is safe to do so and support them through involvement with the department. This is a shift from a mandated reporting culture to a mandated supporting culture.

Key focus areas include:

- Creating a kin-first culture;
- Implementation of Family Matters;
- Expanding the provider continuum;
- Reducing hospital overstays;
- Drawing down additional Federal Title IV-E Funds;
- Identifying additional Evidence Based Programs (EBPs);
- Proactively focusing prevention efforts upstream;
- Advancing well-being and connections for emerging adults; and
- Leadership development and professional development opportunities for DHS staff.

Family Matters

Research shows, time and again, that family connection is essential to our development. Yet here in Maryland, fewer than 1/4 of young people experiencing out-of-home care live with kin. And the path to better starts with believing that kin can care for their loved ones. We must invest in

kinship caregivers. When we apply this simple belief to our practice, we will reverse the unacceptable reality that in Maryland, young people who enter out-of-home care as teens are 40% less likely to reunify with family than their peers across the country. We must, we can, and we will do better.

Governor Moore signed a new law which went into effect on October 1, 2024, and is the cornerstone of Maryland's kin-first culture. The law establishes a preference for youth experiencing out-of-home care to live with relatives— including family by choice. It also modernizes Maryland's kinship care— removing outdated language that excludes contemporary concepts of family and updating the statute to reflect how families are formed today. DHS subsequently updated Code of Maryland Regulations (COMAR) chapter titled Kinship Care Program Standards (07.02.09); these regulations went into effect on December 12, 2024.

Family Matters is the philosophy driving DHS' shift in strategy and approach—and the approach itself. It is about intentionally weaving together DHS values, goals, policies, and practices that requires us to think and operate differently, to change both our agency culture and practice.

Expanding Provider Continuum

On October 1, 2024, DHS, in partnership with the interagency rates committee and the other child-service agencies, launched comprehensive rate reforms for residential care providers across the state. The new rates reflect our commitment to improving outcomes for Maryland's children experiencing out-of-home care and ensuring that provider partners are adequately resourced to meet the complex and changing needs of our youth in care. With the new rates came clear expectations aligned with the Moore-Miller Administration Values, rooted in being responsive, moving urgently, data-driven, heart-led, and challenging the status quo. Specifically, the expectations included:

1. Timely Response to Referrals: We expect residential care providers to respond within 48 hours to our placement referrals. We will be accountable to you and ensure that our placement teams are equally responsive. Children experiencing a crisis should not and will wait. Timely responses will be critical to preventing delays in care and ensuring that youth are placed in the most appropriate settings as quickly as possible.

2. Acceptance of Maryland Youth to Prevent Out-of-State Placements: In recent years, too many of our youth had to be placed out of state, far from their families, communities and support networks. This is unacceptable. With the new rates, we expect Maryland providers to prioritize accepting Maryland youth who meet program criteria and within your organization's provider profile. Together, we will dramatically reduce, and eventually end, out-of-state placements whenever possible. This will help us keep children closer to home, where they can maintain stronger connections to their families and communities.

3. Innovative and Evidence-Based Solutions: The complex experiences of youth who require out-of-home care require innovative and tailored approaches. We expect providers to utilize the new rate structure to implement evidence-based models and innovative practices that support positive outcomes for youth.

Hospital Overstays

DHS is working with urgency to reduce and eliminate the occurrences of a hospital overstay through detailed case management and follow-through. Weekly staff meetings with local departments have been implemented to review cases, address placement and treatment needs, and prevent hospital overstays before discharge. For youth already experiencing hospital overstays, these meetings foster collaboration with the Local Department of Social Services (LDSS), service providers, and hospitals to support true collaborative discharge planning. To further improve communication and coordination, DHS established a youth hospital liaison position. The liaison works closely and proactively with hospitals, MDH, and DJS staff to ensure timely discharges and smooth transitions to appropriate placements. Additionally, DHS developed a clinical social work consultant position to work directly with private providers and hospitals, which is expected to be filled in FY26. DHS remains committed to collaborating with hospitals statewide to ensure safe and timely discharges to the least restrictive, most clinically appropriate service provider. In 2024, through these efforts, we drastically lowered our numbers of youth in hospital overstays.

DHS continues to participate in weekly interagency meetings facilitated by MDH with other state agencies regarding youth that are hospitalized and have complex care needs. DHS also continues to partner and collaborate with DDA for the placement of DDA eligible youth over age 18 in the care of DHS. DDA provides an age exception to allow for youth under the age of 21 to be placed in DDA licensed adult group homes. These placements allowed youth to remain in the same placement when they transition from out-of-home care to adult DDA residential services, freeing up beds in licensed DDA child placements.

Drawing Down Federal Title IV-E Funds

DHS claims federal funds for eligible youth in out-of-home care based on certain criteria. In early calendar year 2024, DHS completed a review of a backlog of nearly 1,700 cases and were able to claim additional federal funds as a result of this review and the finalization of those cases.

Leadership Development and Professional Development Opportunities for DHS Staff

In partnership with the Annie E. Casey Foundation, DHS hosted a total of three 2-day sessions where DHS Central Office and Local Department leaders gathered to learn more about Results Count®. For 30 years, Casey has used Results Count® to help leaders in the social and public

sectors achieve better outcomes for children and families, supporting initiatives that help children get ready for school, reduce reliance on juvenile detention and incarceration and help more young people grow up in families. Through Results Count®, leaders can develop and practice these skills over time to become more powerful and effective in their work. The skills touch on maximizing one's contribution through data-driven and equity-informed analyses and performance measures.

MDH continues to increase its provider capacity for in-home support services through the Family Supports Waiver, Community Supports Waiver, and Community Pathways Waiver. A variety of training opportunities have been made available to the DDA licensed providers to enhance their skills and expertise.

MDH continues to collaborate with DHS and DJS to identify appropriate DDA licensed residential providers to meet the needs of youth in DHS care and custody as well as youth in Voluntary Placement agreements. MDH continues to look for opportunities to improve services, provide resources to providers, and increase provider capacity for all waiver services.

In fall 2023, MDH/DDA began a Dual Diagnosis Cohort to support providers who are serving individuals with co-occurring intellectual/developmental disabilities and behavioral health needs. The cohort learning model will continue to expand to additional DDA providers in the Spring 2024 and following.

MDH also allocated \$4.8 million from an emergency COVID grant for continued development of mobile crisis and stabilization training, technical assistance, implementation, and direct services. This will assist youth in remaining in their current home or avoiding the need for a more restrictive placement. An additional \$1.35 million is being allocated from MDH's COVID-related federal Mental Health Block Grant to fund and monitor mobile crisis and stabilization, care coordination, and related expenses. This funding was utilized in FY 2022 and continued into FY 2023. Additional MDH funding was utilized to develop additional single agreement high-intensity resources. MDH also started the development of an inpatient bed registry and a partnership with Maryland 211 to assist emergency rooms with locating community discharge resources as well as addressing the broader overstay issues. In November 2023, the MDH Healthcare System opened 12 additional beds at JLG RICA following emergency construction to create a more safe and secure environment for high-intensity children and adolescents. These 12 beds include 6 beds for high-intensity RTC placements and 6 beds for the Facility for Children (FFC) Program. The FFC provides competency attainment services for court-involved children and adolescents.

MSDE developed the Maryland School Mental Health Response Program, which partnered with the National Center for School Mental Health at the University of Maryland School of Medicine. The School Mental Health Response Program provides timely support, technical assistance,

consultation, professional development, and expertise to local education agencies (LEAs) across Maryland to address student and staff mental and behavioral health concerns. As part of the program, the Maryland School Mental Health Response Team was created. This centralized team includes a director, a child and adolescent psychiatrist, and three clinical mental health specialists. The goal of the team is to enrich and enhance, not replace, the work of site-based student support personnel. All 24 LEAs across Maryland have utilized the Maryland School Mental Health Response Team. Since its inception in 2022, the team has serviced over 1,100 mental and behavioral health requests throughout Maryland. These requests include training and professional learning, general consultation, system consultation, complex case consultation, resource management, and crisis response support.

MSDE also offered four AW prospective provider workshops in FY24, reaching 124 individuals potentially interested in becoming a provider. Technical assistance sessions were offered to those prospective AW providers who expressed interest in applying to become a Medicaid provider. Additionally, AW Liaisons conducted targeted outreach to current providers to discuss expansion of services, emphasizing the need for additional residential habilitation providers and homes. In addition, in FY24, MSDE and MDH focused on compliance with the Community Settings Rule (CSR) by developing materials to ensure participants receiving AW therapeutic integration and residential habilitation services have full access to the benefits of community living in the most integrated setting possible.

During Secretary Schiraldi's first year at the Department of Juvenile Services (DJS), 42 youth known to the agency were involved in gun violence, as victims or alleged perpetrators. This alarming number highlighted the lack of programming specifically targeting gun violence prevention. To address this crisis, DJS established the Thrive Academy (TTA), the nation's first program where a juvenile justice agency applies a Group Violence Reduction Strategy specifically focused on youth within the juvenile justice system. In the spring of 2023, the Moore-Miller Administration allocated \$5 million in American Rescue Plan Act (ARPA) funds to DJS to address youth gun violence, by launching TTA. TTA provides intensive, community-based programming for youth identified as being at a heightened risk of involvement in gun violence. Key components of the program include:

- Pairing each youth with a specialized DJS case manager and a life coach with lived experience in the justice system. These life coaches work closely with youth and their families to explain the risks of gun violence, assist in creating life plans, and provide ongoing, 24/7 support.
- Offering a "Suitcase of Supports," individualized to each youth's needs, which may include:
 - Paid employment opportunities and coaching.
 - Assistance with college or vocational training.

- Confidential relocation services for youth and families in danger of gun violence.
- Trauma therapy.
- Prosocial activity opportunities.
- Fiscal incentives for participation and achieving milestones.

The Thrive Academy launched in Baltimore City and Baltimore County in September 2023, expanded to Prince George's County in December 2023, and began operations in Anne Arundel County in January 2024. These jurisdictions accounted for 82% of gun violence victims or perpetrators in FY 2023. Thrive providers in each location currently have the capacity to serve 25 youth at a time. DJS is working to expand the program statewide.

Strategies for FY 2025 and Conclusion

The Children's Cabinet will release a 3-year strategic plan in CY 2025, highlighting the State's priorities and top policy recommendations as it relates to children and families. The Cabinet has identified early priorities relating to services for youth at risk of out of home placement, including place-based strategies to addressing child poverty through the ENOUGH Initiative and supporting children with complex or intensive needs through other agency initiatives. In 2025, the agencies will continue to employ and build upon these priorities individually and through the Children's Cabinet.

MDH is committed to finding both short and long-term solutions to the challenges surrounding youth in hospital overstay and youth without an appropriate residential level placement, when that has been determined to be medically necessary and appropriate. MDH is on target to complete additional construction at JLG RICA in 2023 for a total of 18 beds (12 opened in late 2023 with additional beds expected in 2024) flexible unit supporting the FFC and high-intensity RTC population for a total net increase in RTC beds in 2024. Additionally MDH saw four new "high acuity" RTC beds open in December 2024 (licensed as RTC, pilot program funding) as well as 7 high intensity "stabilization beds" designed to help reduce some of the delays experienced by youth awaiting residential level placements (RTC and other residential programs). MDH continues to work with its existing RTC providers to problem solve and identify solutions to allow providers to safely accept the most challenging youth on a case-by-case basis. Furthermore, MDH in partnership with DHS, DJS and MSDE, continues to meet weekly to collaboratively resolve the placement challenges for Maryland's most complex youth, regardless of lead agency.

MDH will continue to work with its RTC and Medicaid partners to expand upon the efforts that began in FY 2022, regarding rate structure and specialized or enhanced bed capacity for the complex youth currently experiencing acute placement challenges. In mid FY 2023 several RTC providers agreed to participate in a pilot program designed to provide them a higher base rate price point, in response to their commitment to accept a larger proportion of higher acuity youth.

Early feedback regarding the efficacy of this effort is expected in FY 2024. Additionally MDH continues to gather information and work with the other child serving departments to address broader issues of rate reform in the residential treatment space. Finally MDH expects to apply to participate, in collaboration with the other Maryland child serving departments, in the NASMHPD State Policy Academy. This invitation only event is intended for a small interstate collection of government leaders to develop an actionable roadmap to improve outcomes for the most complex behavioral health needs youth, with whom all states are similarly struggling. All of these projects will continue to evolve throughout FY 2024-2025.

MDH continues to outreach to out-of-state RTCs in an attempt to build new relationships and encourage providers to explore joining the Maryland Medicaid provider network. MDH continues to invest financial and personnel resources to define and address bed needs across the out-of-home spectrum. MDH is also working to expand its capacity to divert from out-of-home placements, both through offering general resource and referral options under the 211P4 efforts, and by strengthening and expanding provider capacity under both Targeted Case Management (TCM) care coordination and 1915i waiver intensive in-home EBP services. The expectation is that by improving the services and supports available to families in their natural settings, families will be better able to maintain their youth at home, and will be more quickly able to accept them back into a home and community setting.

MDH continues to offer a variety of support services to youth who meet the requirements for the DDA waivers through Medicaid Home and Community Based Services (HCBS). MDH focuses on six areas to meet the needs of people receiving services: Assistive Technology, Self-Determination, Self-Advocacy, Employment, Independent Living, and Supporting Families. MDH will continue to partner with DHS and DJS to identify DDA licensed providers to support youth in need of out-of-home services. The DDA Dual Diagnosis Cohort will continue to look at ways to support DDA providers working with youth with Dual Diagnoses.

In FY 2025 DHS will continue to focus efforts on:

1. Fully implementing the Family First Prevention Services Act to build prevention services for children, with an emphasis on ages 0-5;
2. Expanding intervention efforts such as family findings and kinship care supports;
3. Enhancing reunification services to families;
4. Advancing well-being and connections for emerging adults ; and
5. Building Maryland's licensed provider network.

In FY 2025, DHS is focused on continuing to expand access to four existing Evidence Based Practices (EBP) in areas with identified needs. These EBPs include Healthy Families America, Parent-Child Interaction Therapy, Functional Family Therapy, and Multisystemic Therapy.

As Maryland prepares to submit its updated 5-year Title IV-E Prevention Plan, DHS, in collaboration with local departments of social services and stakeholders, is currently undergoing a comprehensive assessment to determine additional EBPs to include in the prevention plan that better meet the needs of Maryland children and families and prevent entry into care. DHS anticipates the updated Title IV-E Prevention Plan will be submitted no later than May 1, 2025.

DHS continues to partner with the Maryland Department of Health to build a robust behavioral health continuum of care for all children and youth, improve Medicaid provider integration, and explore other opportunities to collaborate. DHS will develop detailed action plans for these objectives.

DHS remains committed to supporting young people to advance life long well-being and connections. Through continued partnership with the Annie E. Casey Foundation, DHS will develop and implement strategies that prevent teens from entering out-of-home care and ensure that youth who exit out-of-home care do so in the context of family and community connections with the resources needed to thrive. Planned actions include:

- Intensive communication with external stakeholders to educate them on Family Matters as well as ensure ongoing collaboration.
- Continue to implement and expand transformative leadership and strategy development by using Results Count tools and an equitable results framework by 2025.
- Deep-dive case reviews for emerging adults that are age 14 and older that have been in care more than two years.

DHS has taken proactive steps to address providers' challenges and identify the support needed to accept youth. A new, standardized Placement Request form has been developed and will be integrated into the system of record, providing additional information to help determine the appropriate level of care. SSA is also beginning to collect data on placement denials and the reasons behind them.

The monthly Provider Advisory Council (PAC) meetings will enhance communication between providers, SSA, and local departments. These meetings facilitate collaboration between DHS and providers to develop new programs and refine existing ones, ultimately improving the placement experience and process for youth in the Department's care and custody.

MSDE continues to support preventative service initiatives to hold or reduce the need for nonpublic placements. The goal for LEAs is to build capacity for placements. Ongoing technical assistance opportunities are designed to support LEAs and nonpublic special education day and residential schools in enhancing programming for students to ensure effective and individualized service packages. MSDE will continue to collaborate with MDH to provide technical assistance opportunities to AW Service Coordinators (SCs) employed by each LEA, and to AW provider agencies, to support the AW program; FY25 assistance is focused on training SCs to use

Community Settings Questionnaires (CSQs) to determine if AW provider sites meet overall CSR compliance. In addition, the AW Risk Assessment (RA) was updated and available for use beginning FY25. The RA is a tool for identifying high risk areas for an AW participant and the supports available and/or currently in place to address those risks. SCs must complete RAs for all children newly enrolled in the AW. The MSDE will continue to collaborate with DDA and other HCBS waiver programs to strategize provider recruitment for all services. MSDE's AW Liaison will create opportunities for existing providers to create mentorship relationships and share resources. She will also research provider and community living network meetings to promote recruitment. In addition, the Maryland School Mental Health Response Team will continue to provide school mental health consultation services, technical assistance, and professional development to LEAs across the state. Data is collected on each encounter with an LEA. The team will continue to analyze the data to identify trends and gain better efficiency in responding to the needs of the LEAs. Some of those needs include complex behavioral case analysis support, implementation of a multi-tiered system of supports, mental health integration, mental health screening, crisis response support, LGBTQIA+ resources, staff wellness, community referrals, data collection, and substance use resources. The program will continue to hold monthly learning community meetings where best practices across LEAs are shared on relevant school mental health topics, trends, and concerns. All materials and resources are shared via an online platform that all 24 LEAs can access and share.

The initiatives outlined for FY 2025 reflect DJS's commitment to reducing out-of-home placements through a holistic approach. By expanding the services continuum, strengthening family engagement, and fostering innovative partnerships, DJS aims to ensure that youth have access to the resources and opportunities they need to thrive in their communities and build successful futures. With an additional \$7 million allocated to strengthen the services continuum, DJS is implementing strategic initiatives aimed at keeping youth in their communities, addressing their needs effectively, and minimizing reliance on residential placements.

DJS is broadening its array of services to support youth at various stages of system involvement. Diversion programming aims to prevent youth from entering the system through accessible, community-based alternatives. Detention alternatives and release supports reduce reliance on detention by offering services that enable youth to remain safely at home. Post-dispositional community programming provides structured interventions within communities as alternatives to residential placements. Re-entry supports facilitate smooth transitions back into communities for youth exiting the system. Additionally, education and workforce development programming equips youth with skills and opportunities to prepare for future success.

Credible messengers, individuals with shared life experiences, are central to DJS's efforts to build trust and foster meaningful connections with youth. This program is being expanded to serve youth participating in Thrive Academy, youth on probation struggling with compliance,

and youth charged as adults but transferred back to the juvenile system. To support this expansion, DJS has partnered with the University of Maryland to educate organizations on designing and implementing credible messenger programs and has coordinated with the Interagency Rate Committee to provide technical assistance for securing non-residential service rates.

DJS is emphasizing restorative and community-focused interventions through several key approaches. Restorative response programs collaborate with local partners to promote accountability and repair harm, diverting youth from formal court proceedings. Auto theft diversion programs address youth involvement in auto theft, preventing deeper system engagement. Additionally, DJS is leveraging state and federal funds to support local organizations, ensuring early system youth—such as those in pre-court diversion or Children in Need of Supervision (CINS)—access essential services.

DJS is committed to providing youth with opportunities to gain skills and prepare for their futures. Through partnerships with Workforce Investment Boards, DJS offers year-round and summer job opportunities for youth. In-facility job creation in collaboration with the Department of Natural Resources provides employment for youth who have earned their high school diplomas. DJS is also planning probation and aftercare employment programs that combine education, soft skills training, and apprenticeships.

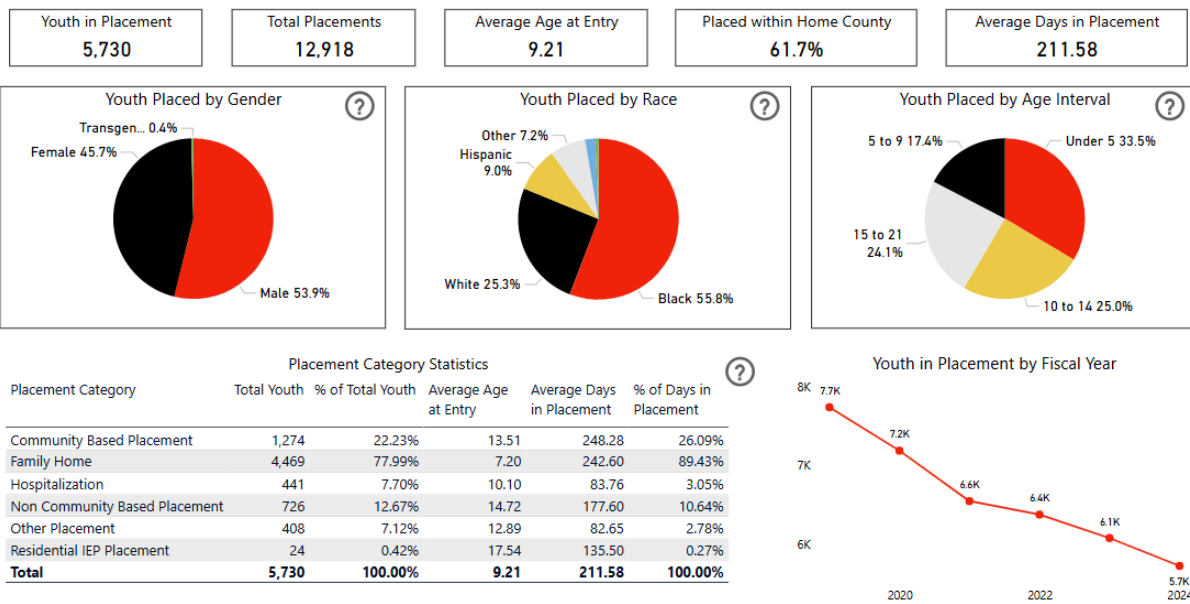
The Governor's Office for Children looks forward to supporting and building upon these strategies with the Children's Cabinet agencies to best meet the needs of children and families in Maryland.

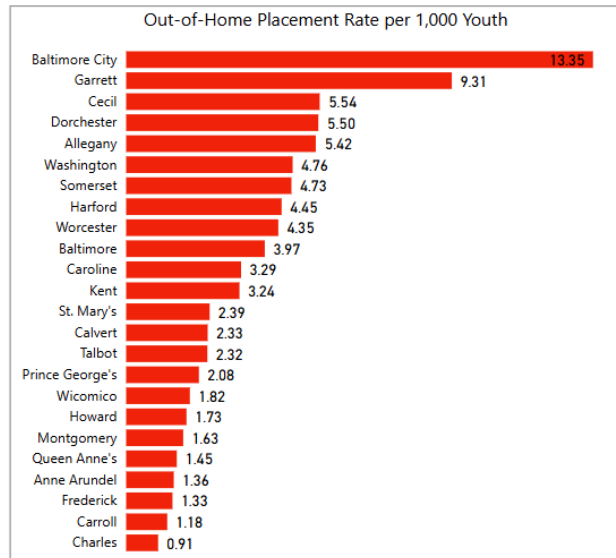
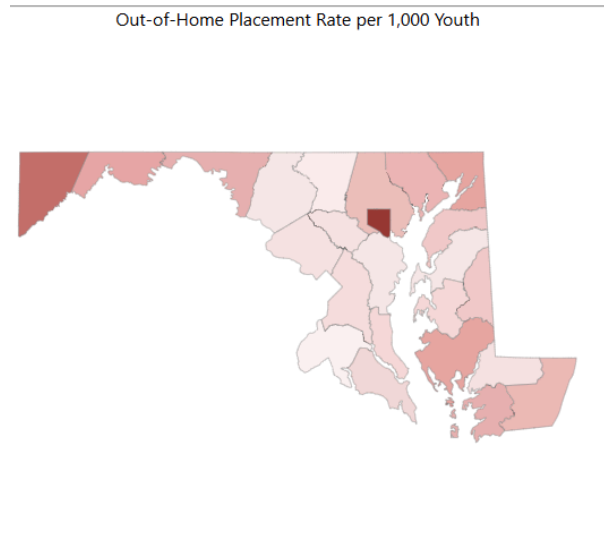
Appendix

Number of Youth in Out-of-Home Placement for Fiscal 2024, 2023 and 2022

Please refer to the following illustrations showing the number of youth in out-of-home placements for each identified fiscal year.

Number of Youth in Out-of-Home Placement During FY 2024



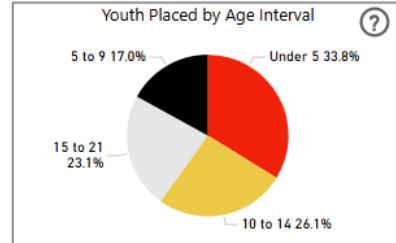
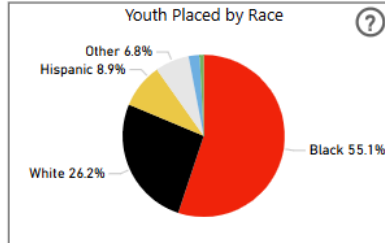
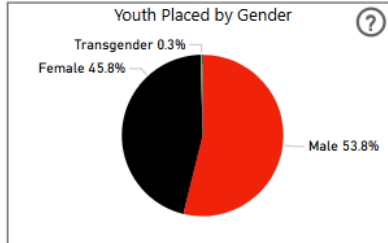


Youth Home County and Placement County

Youth Home County and Placement County																												
Home County	AA	AL	BA	BC	CA	CE	CH	CR	CV	DO	FR	GA	HA	HO	KE	MO	OOS	PG	QA	SM	SO	TA	UNK	WA	WI	WO	Total	
Allegany		49	7	16	2						2	3	4			1	17	1		2	3	11	4				81	
Anne Arundel	97	13	25	51	9	2	7			4	8	8	7			10	9	9					11	5	3		212	
Baltimore	55	18	432	405	11	12	6	12	5	4	21	10	47	23		46	37	40	2			1	73	22	7	1	882	
Baltimore City	72	23	555	1,405	6	3	9	11	4	6	34	31	56	38	2	68	43	132	1	1	5	1	199	25	6	2	1,965	
Calvert	5		6	6			4		28		1	1	3	2		7	3	7		5			7	2		56		
Caroline	1		1	6	18							2									5				1	31		
Carroll	1	3	3	13	1	2		25			1	2		4		3	1							5		51		
Cecil	3	1	27	28	1	105				4	2	1	11	6	1	3	17	4	1		1		12	5	6	148		
Charles		2	2	5			26				3	1	1	1		1	6	6	1	3			2	1		42		
Dorchester		2	6	6	1	1		1		11		2	4		1		5	5	5		3	5	3	2	4	45		
Frederick	1	3	14	15	3		2	2			59	1		1		12	6	4				10	14	1		99		
Garrett		3	3	3								48					6				1		3	4		56		
Harford	6	5	51	55	3	9					4	6	201	5		14	16	7					31	2		296		
Howard	6	2	26	52	2		1	2			3	5	1	66		7	14	14					6	2	1	161		
Kent			3	5		1									6	1					1					14		
Montgomery	16	19	58	72	10	3	2	6	1	2	20	12	2	18		323	29	80	1	1	1		40	25	1	518		
Out of State		4	4	1						1	1	10				2	2							2		25		
Prince George's	16	17	63	101	2	1	13		1	9	22	16	1	8		78	42	407		5	1		53	9	2	630		
Queen Anne's	2		2	6		1				1	1			1	3	1	1		7			1		1		18		
Somerset			6	7											1	5	1	2		1	5		2		15	1	27	
St. Mary's	1		12	14			7		4	1			10	1		4	2	15		32			10	3		77		
Talbot			4	7	3	1				4						1	1	1	1			9			1	19		
Washington	1	7	23	31		1	1				9		2		2	9	24	10					12	133		186		
Wicomico	1	6	12	9				1			4	4		1		1	6	4			6		6	3	19	54		
Worcester			8	4	1					3						1	4						8	1	24	24	44	
Total	283	174	1,353	2,323	73	142	78	60	43	50	195	163	350	176	15	598	292	748	19	50	24	25	499	270	91	28	5,730	

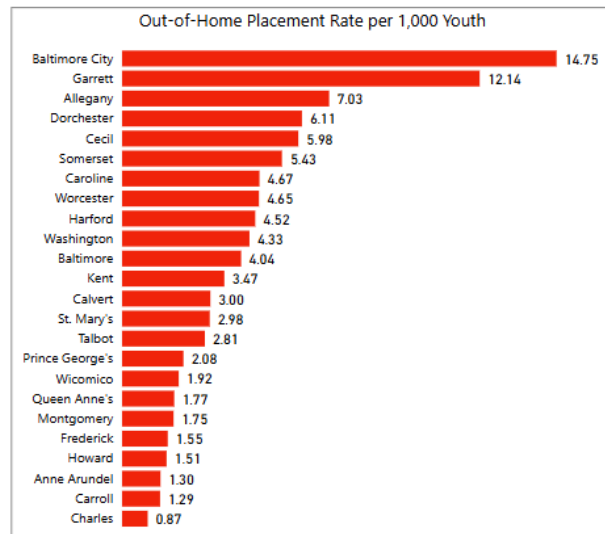
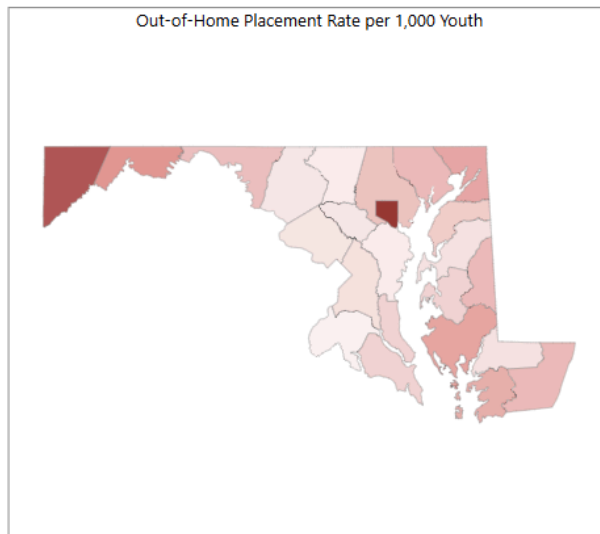
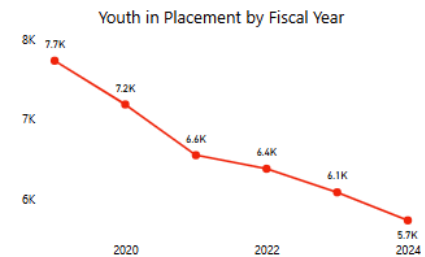
Number of Youth in Out-of-Home Placement During FY 2023

Youth in Placement 6,084	Total Placements 14,610	Average Age at Entry 9.25	Placed within Home County 63.1%	Average Days in Placement 227.23
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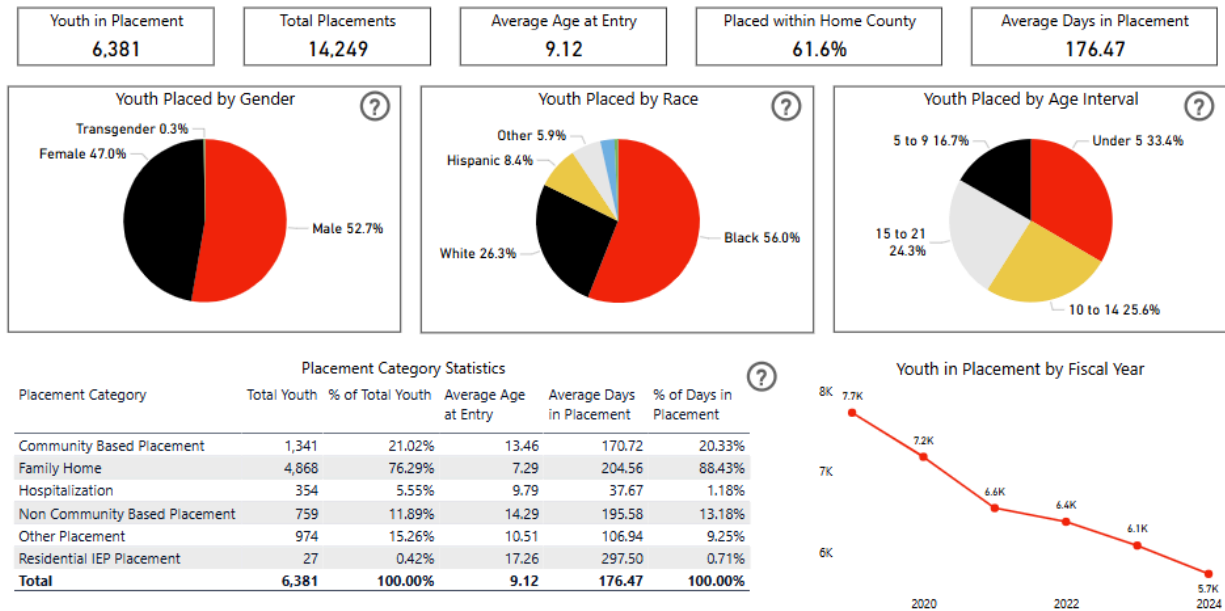
Placement Category Statistics (?)

Placement Category	Total Youth	% of Total Youth	Average Age at Entry	Average Days in Placement	% of Days in Placement
Community Based Placement	1,323	21.75%	13.45	218.00	20.86%
Family Home	4,784	78.63%	7.47	253.11	87.59%
Hospitalization	388	6.38%	10.21	114.16	3.20%
Non Community Based Placement	766	12.59%	14.51	198.66	11.01%
Other Placement	405	6.66%	13.07	132.59	3.88%
Residential IEP Placement	26	0.43%	17.71	135.40	0.25%
Total	6,084	100.00%	9.25	227.23	100.00%

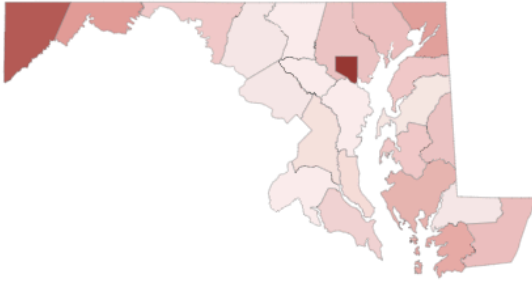


Youth Home County and Placement County																												
Home County	AA	AL	BA	BC	CA	CE	CH	CR	CV	DO	FR	GA	HA	HO	KE	MO	OOS	PG	QA	SM	SO	TA	UNK	WA	WI	WO	Total	
Allegany		70	9	21			2				2	3	1				19	1		2	3	25	9				105	
Anne Arundel	96	9	22	64	4	2	9		4	5	6	6	5			10	16	14	1				40	7	4	1	203	
Baltimore	39	11	450	398	9	12	8	5	2	5	11	6	53	22		41	36	34	1		2	1	144	28	4	2	899	
Baltimore City	85	22	580	1,536	3	1	9	9	2	8	37	28	42	32	1	74	45	154	1	2	2		332	18	10	1	2,171	
Calvert	3	2	7	8			6		36		1	3	2	2		6	8	11		4			21	3		72		
Caroline			2	4	30					1	1	2			1		2		6			4	18		1	1	44	
Carroll	1		9	19	1		1	30			1	1		3		4							9	6		56		
Cecil	2	1	12	25	5	117	2			1	2		17	4	2	2	15	9	1	1			20	4	6	160		
Charles	1	1	5	9			20				1	1	2	2		2	2	7		2			14	1		1	40	
Dorchester		3	8	4	3			2		13	1	4	1		1	2	2	5	5		3	6	13		4	50		
Frederick		1	15	22	1	2	2	8			67	1	1	4		11	7	2					27	11	2	116		
Garrett		10	3	1								65		1			4						5	6		73		
Harford	4	2	46	61	2	9	2				1	6	209	4		14	15	6					30	3		301		
Howard	7	2	27	39	4				1			3	1	65		7	12	17					13	2		141		
Kent			3	5	1					1					11							1	4		2	15		
Montgomery	15	15	43	69	11	5	3	6	1	5	15	5	5	10		362	28	76	1	1			73	19	2	555		
Out of State		1	2							2		6				2	1							1		14		
Prince George's	20	9	62	104	2	4	13		2	5	11	16	1	2		71	35	431		5			133	6	1	631		
Queen Anne's	1		3	5	1	2								1	5	3	3		15			1	3			22		
Somerset	1	1	6	9			1	1	3					2	3	1	1	3		2			9		14	1	31	
St. Mary's		1	12	15			5	7	1			11	3		4	6	11		49				16	3		96		
Talbot			4	5	5	1				2					1	3		1				8	20		2	23		
Unknown				5												1										6		
Washington		10	16	24		2	1	1			5	4	1			11	12	9					25	114		169		
Wicomico	2	5	6	10	1					5	7	1				7	5	5		5			15	3	17	3	57	
Worcester	1	2	7	9						6	1	1				1	1		1			5	7	1	16	26	47	
Total	278	177	1,358	2,471	83	157	84	61	56	63	170	162	352	157	21	639	278	793	36	65	15	29	1,016	245	85	36	6,084	

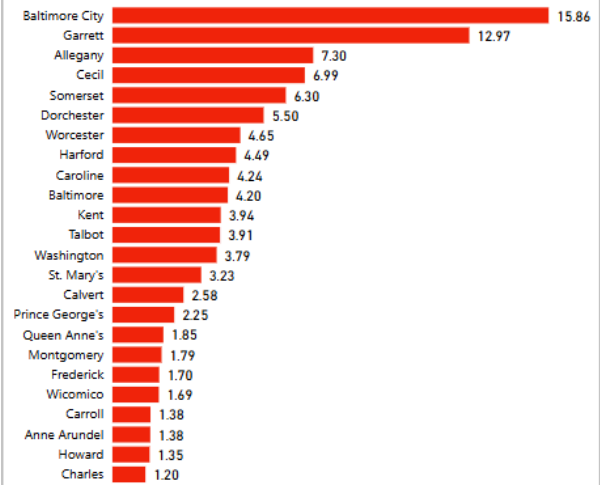
Number of Youth in Out-of-Home Placement During FY 2022



Out-of-Home Placement Rate per 1,000 Youth



Out-of-Home Placement Rate per 1,000 Youth



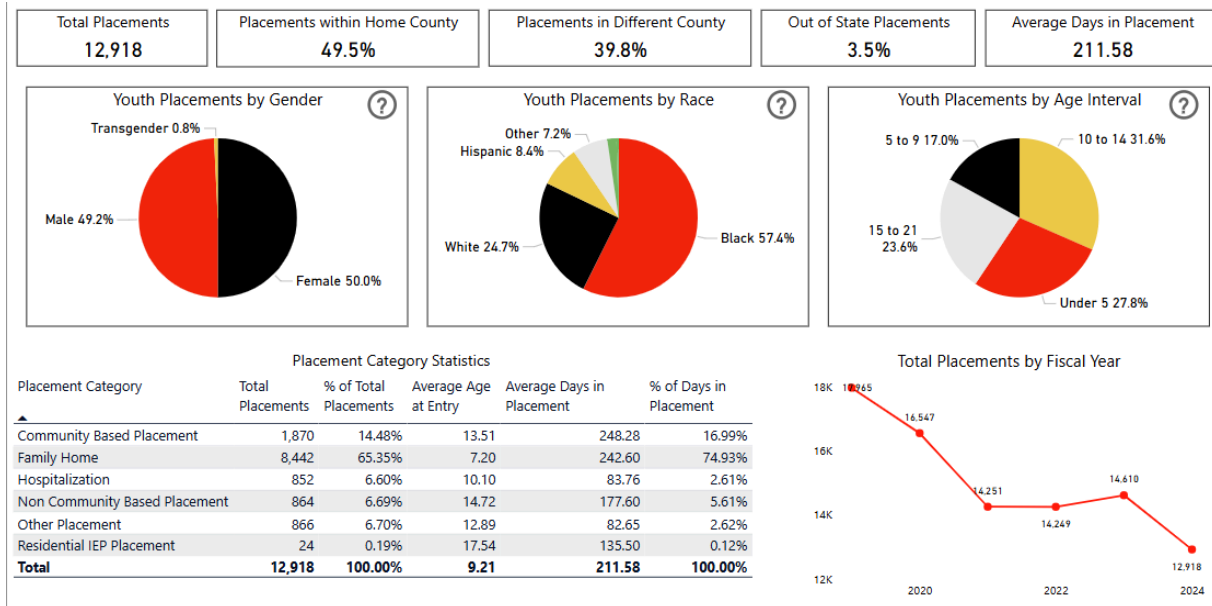
Youth Home County and Placement County

Home County	AA	AL	BA	BC	CA	CE	CH	CR	CV	DO	FR	GA	HA	HO	KE	MO	OOS	PG	QA	SM	SO	TA	UNK	WA	WI	WO	Total
Allegany	1	83	6	13			2			1	2	2			1	2	15	2		1	3	27	9			109	
Anne Arundel	92	4	27	57	3	2	3	2	1	7	3	4	2	5	1	9	19	15	1				48	4	3	214	
Baltimore	31	10	419	411	8	12	11	7	1	11	10	13	41	28	1	34	33	33	1	3		1	162	22	4	1	933
Baltimore City	88	15	615	1,633	3	1	7	15		8	26	23	49	54	1	61	53	146	2	1	1		457	18	8	2,334	
Calvert		2	4	9			2	1	32		1			2		1	7	10		2			15	3		62	
Caroline			2	4	28					2					1		2		1		3	11		3		40	
Carroll	1		7	21	1		2	25	1		2			2	1	4		1				18	2			60	
Cecil	2		21	30	3	122	1							20	4	2	3	14	9	1	2		51	5	7	187	
Charles	1	1	2	13	1		28			1		3	1	1		1	4	4		1			12	2		55	
Dorchester		2	7	3	7			3		11		4		2	3			2	7			1	13	1	4	3	45
Frederick		3	6	20		2	14				63	2		3		16	12	6					22	13	1	127	
Garrett		6	2	2								59		3			10						21	6		78	
Harford	5	4	51	58	2	6	1	2		1		2	206	1	11	16	4						49	6		299	
Howard	8	1	22	26	4		1	1				1		68		5	8	20			1	22				126	
Kent			1	5	1	1									11				1				5		2	17	
Montgomery	18	6	50	72	9	6		12	1	5	17	4		8	1	369	23	62	1		1		92	20	2	567	
Out of State		2	2							3	4	5					1	2								17	
Prince George's	7	6	54	119	1	4	19	2	1	4	8	4	2	9	1	74	36	463		1	1		137	7		680	
Queen Anne's			2	7	3										2	2	3	1	13				6	1		23	
Somerset	1	2	8	6			1			2	1	1			1	4					3		7	1	14	1	36
St. Mary's	1	2	14	11			4	1	8		1		11	3		2	4	12		48			32	3		104	
Talbot			3	7	4	2		1		6							3	3	2			14	15	1	3	32	
Unknown				3																						3	
Washington		9	14	19				1		1	2	5	1			4	12	8					23	104		148	
Wicomico	1	7	6	9	1					3		1		2	1	3	2	5			2		10		18	2	50
Worcester		1	6	12				1		7	2	1	1				1	4	1			1	2	9	11	21	47
Total	257	166	1,351	2,569	79	158	82	88	45	72	142	134	334	195	28	607	282	806	30	59	8	26	1,264	228	80	28	6,381

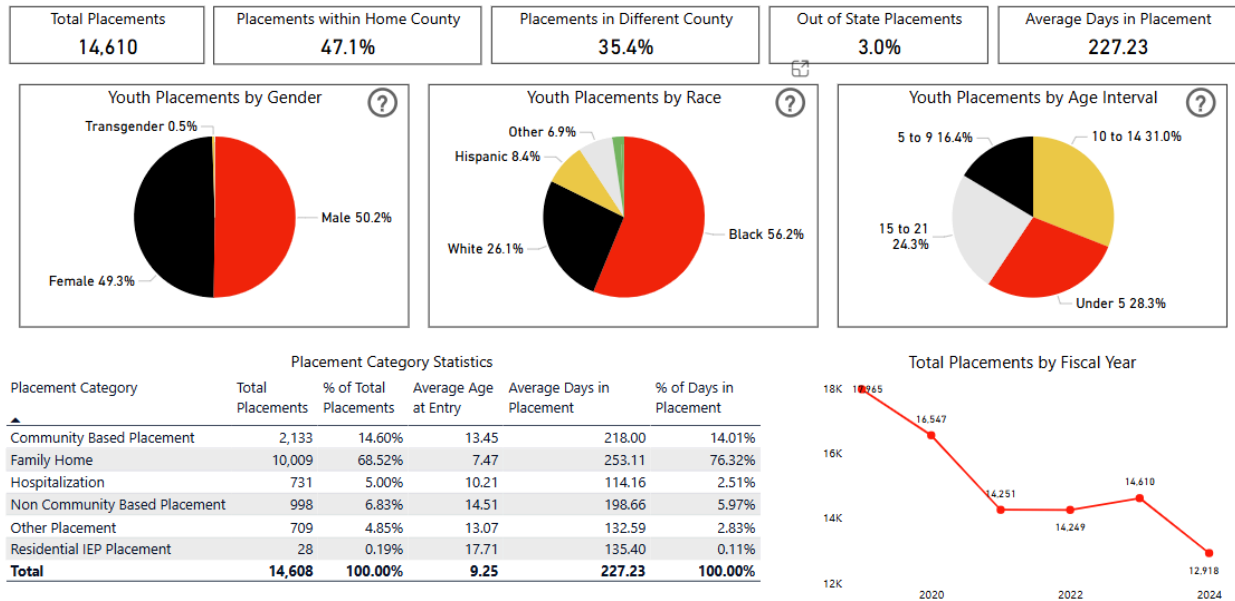
Number of Out-of-Home Placements for Fiscal 2024, 2023 and 2022

Please refer to the following illustrations of the number of out-of-home placements for each identified fiscal year.

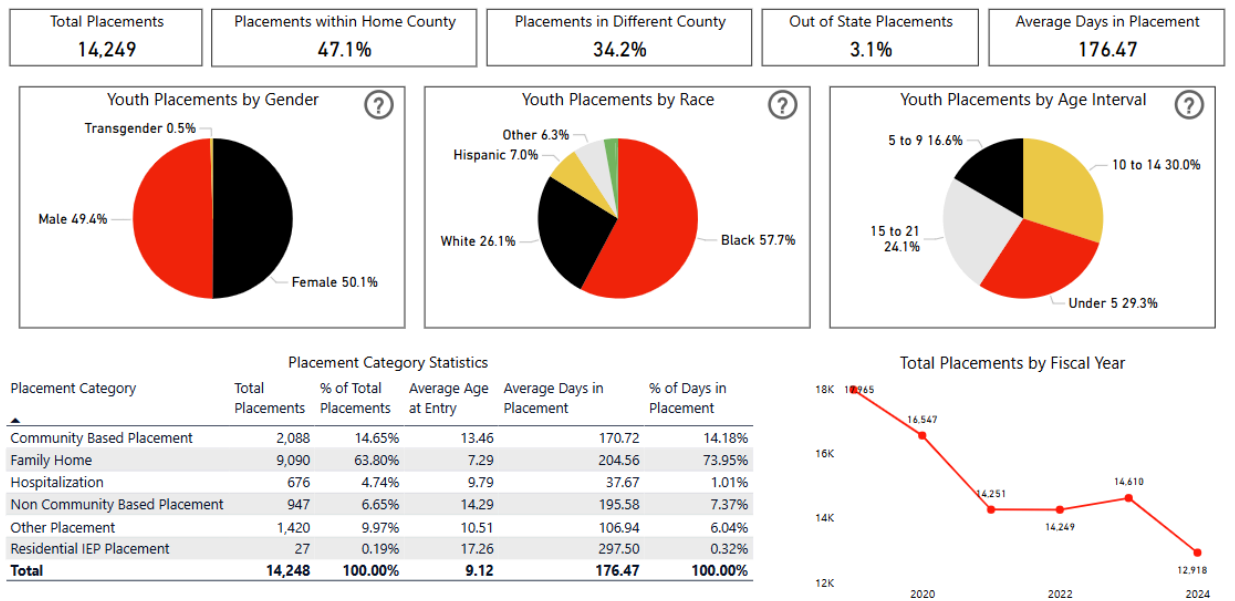
Number of Out-of-Home Placements in FY 2024



Number of Out-of-Home Placements in FY 2023



Number of Out-of-Home Placements in FY 2022

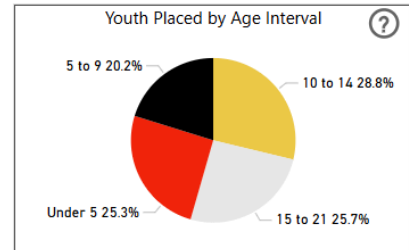
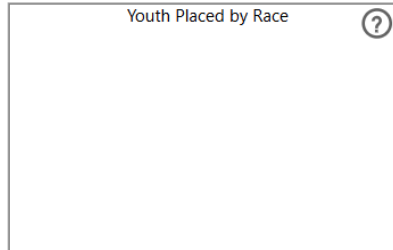
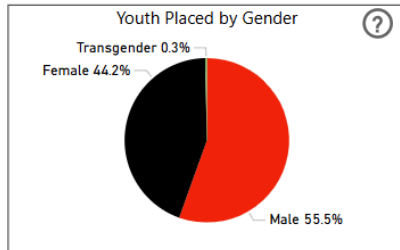


Number of Out-of-State Placements for Fiscal 2024, 2023 and 2022

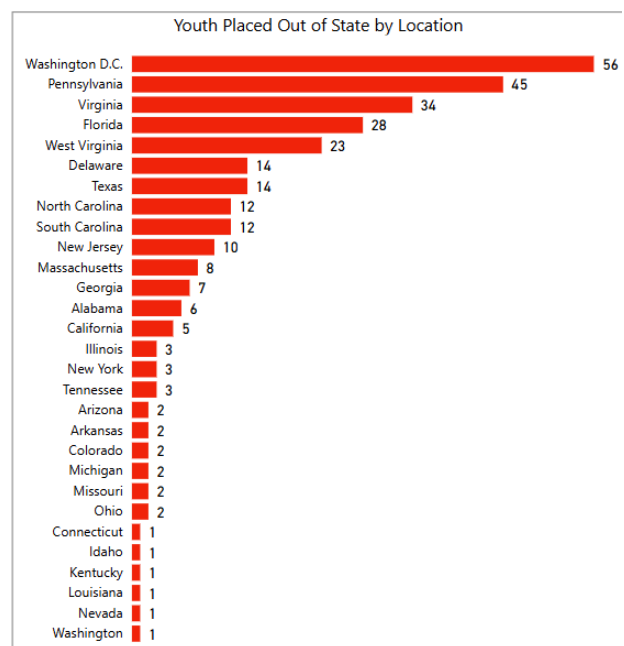
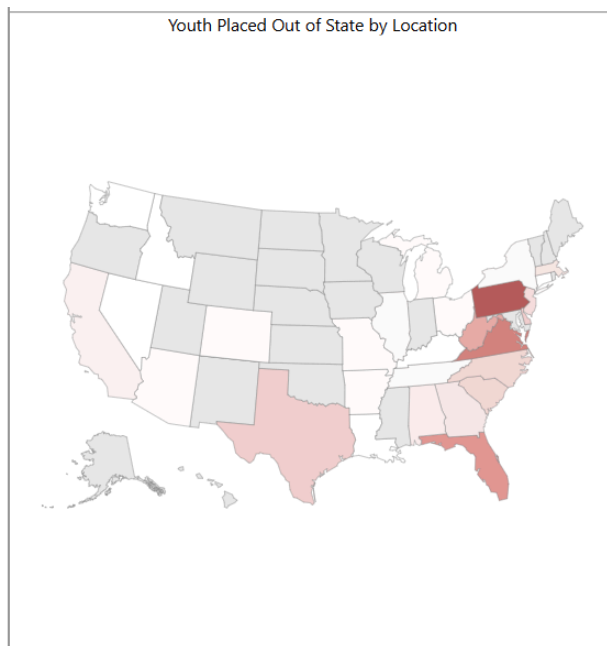
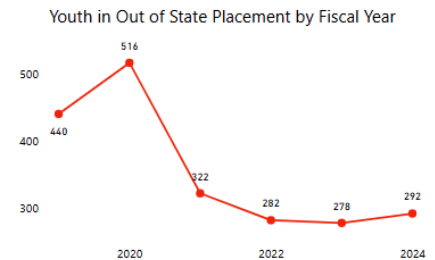
Please refer to the following illustrations as it relates to the number of out-of-state placements for each identified fiscal year.

Number of Out-of-State Placements in FY 2024

Youth in Out of State Placement 292	Total Out of State Placements 419	Average Age at Entry 9.49	Total States with Placements 30	Average Days in Placement 141.96
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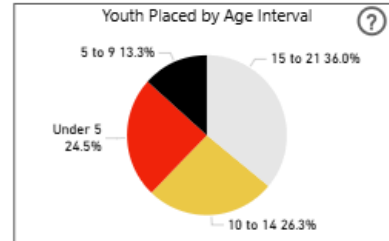
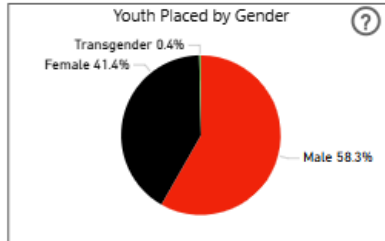


Placement Category Statistics					
Placement Category	Total Youth	% of Total Youth	Average Age at Entry	Average Days in Placement	% of Days in Placement
Community Based Placement	53	18.15%	12.63	187.58	23.98%
Family Home	163	55.82%	7.41	155.54	61.16%
Hospitalization	58	19.86%	9.01	97.39	13.63%
Non Community Based Placement	39	13.36%	15.05	158.38	14.90%
Other Placement	2	0.68%	14.50	122.50	0.59%
Residential IEP Placement	6	2.05%	16.33	99.00	1.43%
Total	292	100.00%	9.49	141.96	100.00%



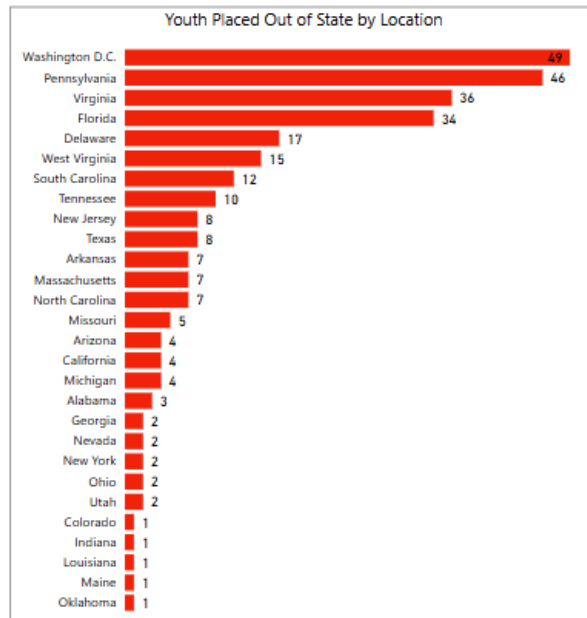
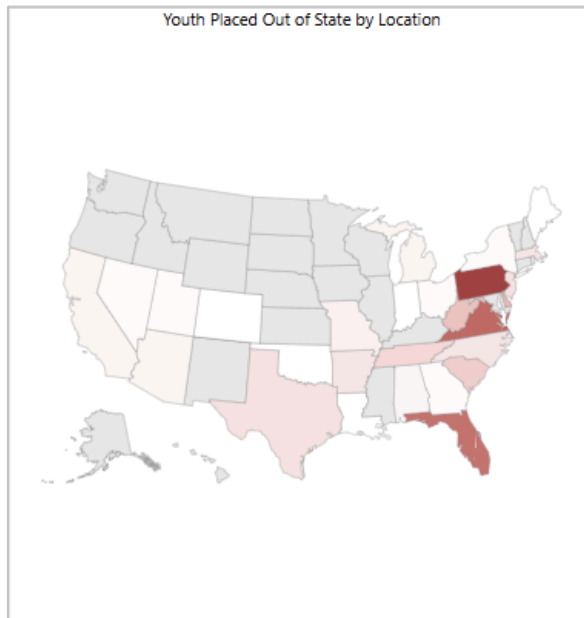
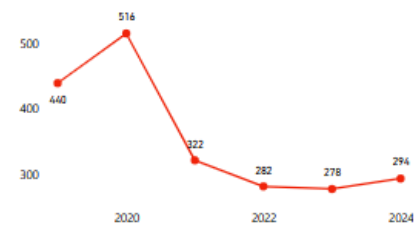
Number of Out-of-State Placements in FY 2023

Youth in Out of State Placement 278	Total Out of State Placements 419	Average Age at Entry 9.67	Total States with Placements 29	Average Days in Placement 189.21
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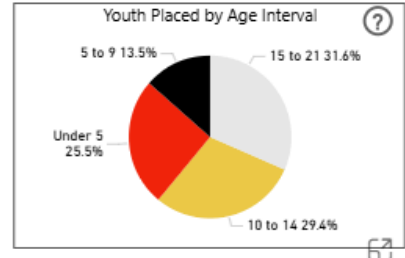
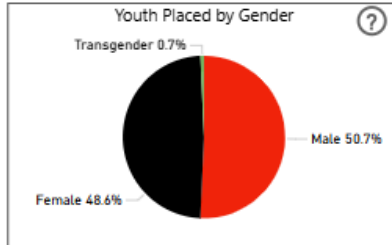
Placement Category Statistics					
Placement Category	Total Youth	% of Total Youth	Average Age at Entry	Average Days in Placement	% of Days in Placement
Community Based Placement	56	20.14%	12.79	185.18	19.71%
Family Home	150	53.96%	7.38	207.36	59.13%
Hospitalization	44	15.83%	8.72	150.21	12.56%
Non Community Based Placement	45	16.19%	15.25	202.39	17.31%
Other Placement	7	2.52%	12.43	46.17	0.61%
Residential IEP Placement	9	3.24%	17.50	95.67	1.64%
Total	278	100.00%	9.67	189.21	100.00%

Youth in Out of State Placement by Fiscal Year



Number of Out-of-State Placements in FY 2022

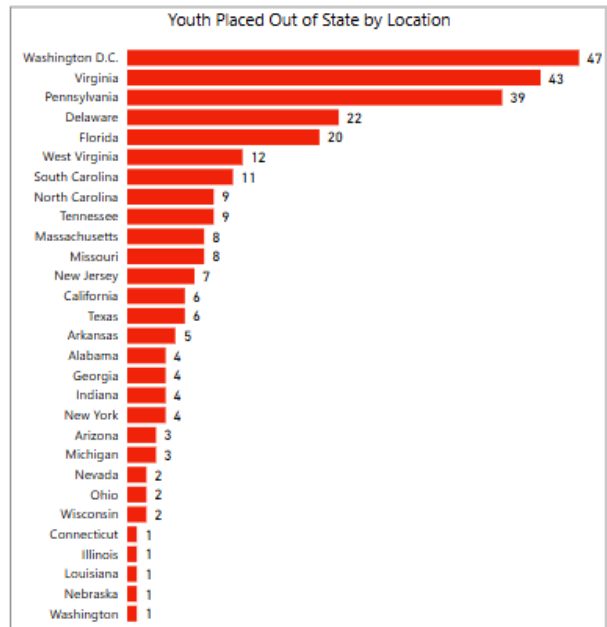
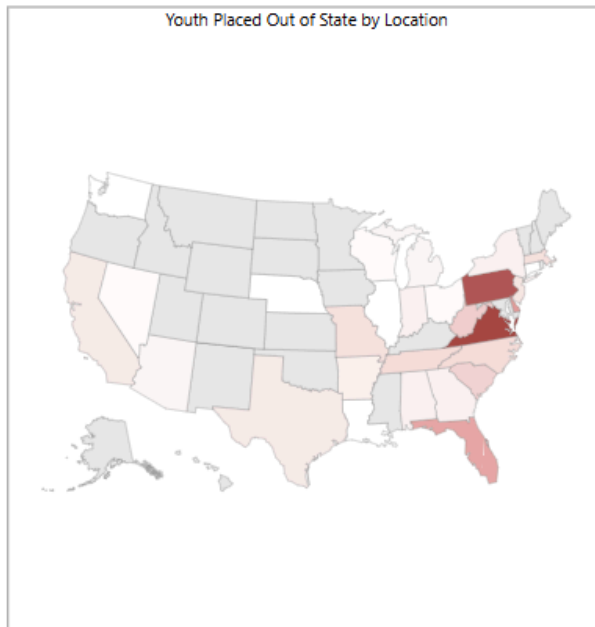
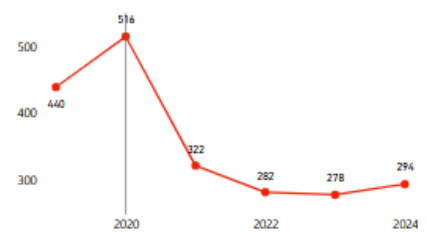
Youth in Out of State Placement 282	Total Out of State Placements 423	Average Age at Entry 9.62	Total States with Placements 30	Average Days in Placement 113.13
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Placement Category Statistics

Placement Category	Total Youth	% of Total Youth	Average Age at Entry	Average Days in Placement	% of Days in Placement
Community Based Placement	48	17.02%	12.12	174.47	26.25%
Family Home	151	53.55%	7.96	141.90	67.16%
Hospitalization	55	19.50%	8.31	30.89	5.33%
Non Community Based Placement	39	13.83%	15.75	49.20	6.01%
Other Placement	13	4.61%	8.15	204.15	8.32%
Residential IEP Placement	9	3.19%	16.78	302.00	8.52%
Total	282	100.00%	9.62	113.13	100.00%

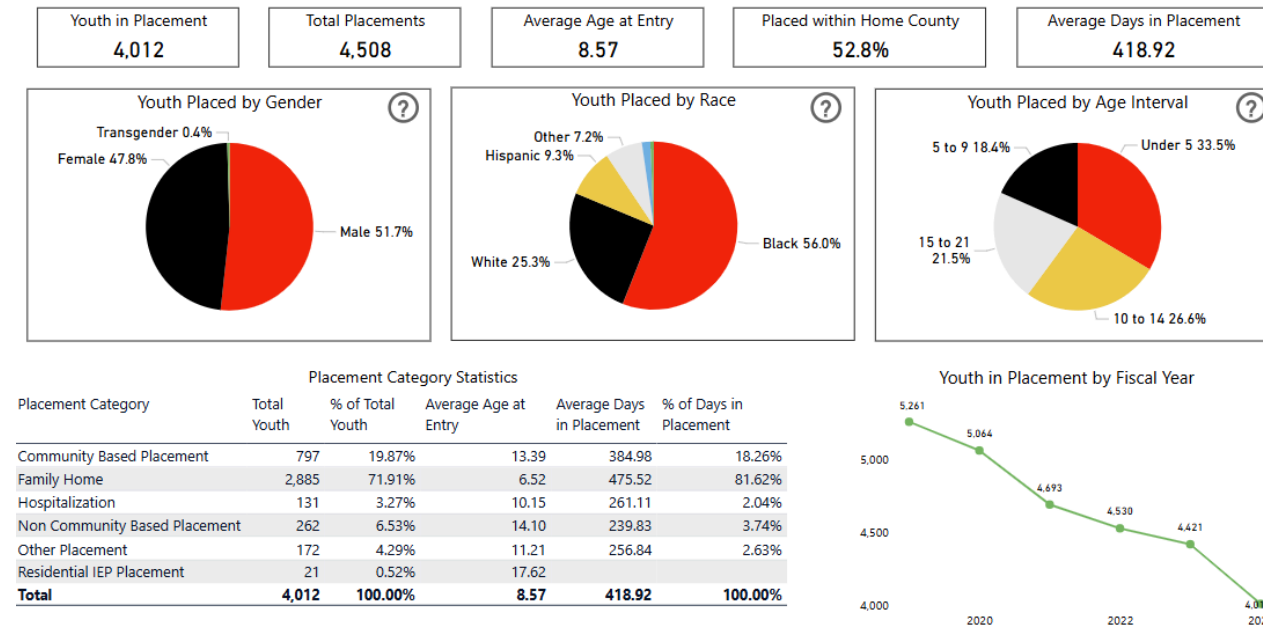
Youth in Out of State Placement by Fiscal Year



Number of Youth in Out-of-Home Placement (as of January 1) for Fiscal 2024, 2023 and 2022

Please refer to the following illustrations as it relates to the one-day counts for youth in out-of-home placements (as of January 1) for fiscal 2024, 2023 and 2022.⁸

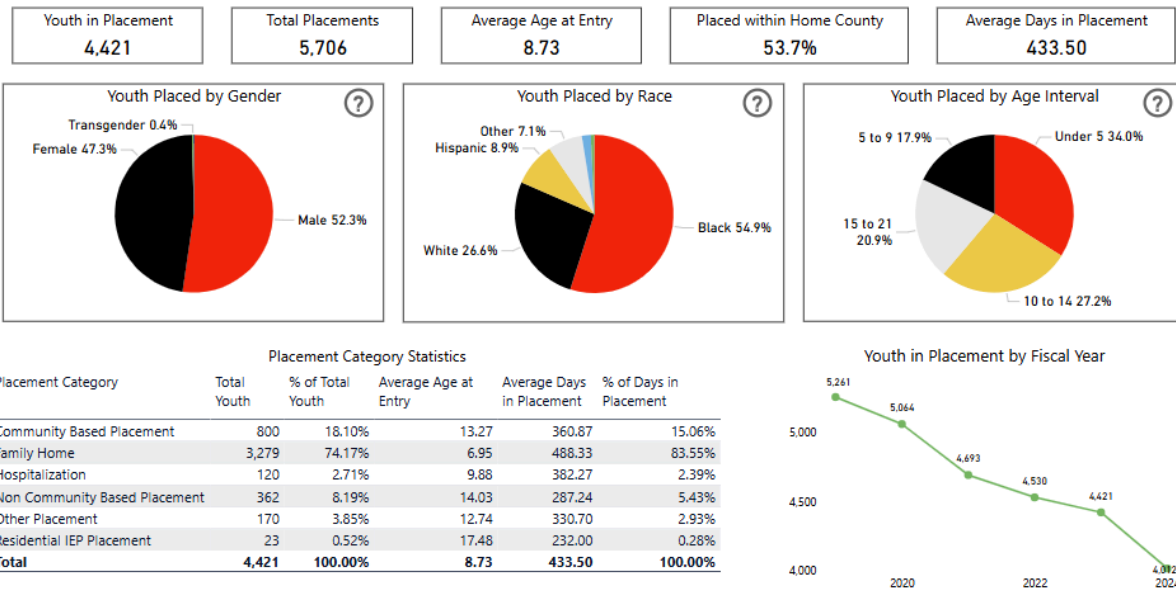
Number of Youth in Out-of-Home Placement as of January 1, 2024



⁸ In 2023, the Governor's Office of Crime Prevention and Policy made improvements to the data dashboard and updated data models to increase the confidence in reporting. As a result, the number of out-of-home placements for January 1 are slightly different from prior years.

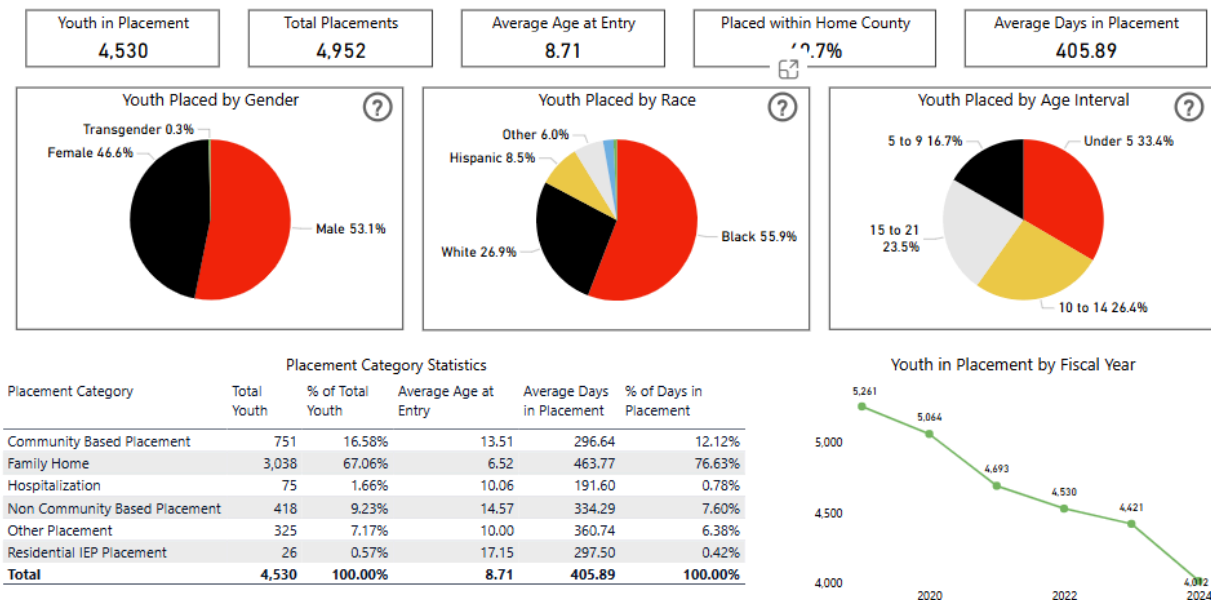
Youth Home County and Placement County																												
Home County	AA	AL	BA	BC	CA	CE	CH	CR	CV	DO	FR	GA	HA	HO	KE	MO	OOS	PG	QA	SM	SO	TA	UNK	WA	WI	WO	Total	
Allegany		18	1	5								2	3				4	1		2			10	2			46	
Anne Arundel	47	1	12	19	5	2	3			1	5	4	4			2	6	3					3	3	1		115	
Baltimore	20	3	252	221	8	8	3	9	1	1	3		29	10		27	13	27	1				31	12	1	1	626	
Baltimore City	27	6	295	911	4	2	5	4	2	3	7	6	24	15	2	30	21	78	1	1	4		77	9	3		1,457	
Calvert	2		3	3			2		23					3	1	4	3	4		2			4	1			47	
Caroline			1	4	10							1										4			1		21	
Carroll			1	7				16						2		2								4			32	
Cecil			10	16	1	60					2		5	1		1	8	2	1				5	1			105	
Charles		1	1	4			7				1		1	1		1	3	1		2							23	
Dorchester		1	2	2	1			1		7			3				2	5			2	3			4		30	
Frederick			6	8	2		1	2			31					4	2	1					6	9			67	
Garrett		2	1	1								37					2							2			42	
Harford		2	18	23	3	4					1	1	100			7	5	5					12	1			173	
Howard	3		15	16	2		1	1			1		1	34		3	9	4					5	1			90	
Kent			3	3											3	1					1						10	
Montgomery	5	8	26	38	9	2	2	2		1	10	2	1	8		183	14	50		1	1		19	8			369	
Out of State		1									1	1	4											2			9	
Prince George's	7	3	37	65	2	1	6			3	5	2	1	3		47	23	266		4	1		26	6			459	
Queen Anne's				4		1				1					2	1			4			1					14	
Somerset			3	4											1			1		1	2		1		11		21	
St. Mary's	1		9	6			3		3					7		1	1	10		18			4	1			56	
Talbot			2	4	2	1				1							1	1				4					16	
Washington		4	8	18			1				3				2	6	7	6					5	69			126	
Wicomico		3	5	8								2				1	2	3			4		3	1	6		32	
Worcester			5	2												1	2						3		5	10	26	
Total	112	53	716	1,392	49	81	34	35	29	19	70	62	182	76	9	322	128	468	7	31	15	12	214	132	32	11	4,012	

Number of Youth in Out-of-Home Placement as of January 1, 2023



Youth Home County and Placement County																											
Home County	AA	AL	BA	BC	CA	CE	CH	CR	CV	DO	FR	GA	HA	HO	KE	MO	OOS	PG	QA	SM	SO	TA	UNK	WA	WI	WO	Total
Allegany		29	3	9			2					1	1				16	1				3	19	3			67
Anne Arundel	47		11	34	4	2	3			2	2	3	4			3	2	10					29	2	3	1	134
Baltimore	15	5	239	246	6	7	4	4	1	1	3	3	30	12		23	15	17	1				85	19	3	1	650
Baltimore City	38	7	294	1,000	3	1	5	6	1	4	12	6	24	15		36	18	84		1	1		196	10	7		1,602
Calvert	1	1	1	5			1	24				1	1			3	5	5		1			14	3			49
Caroline			2		16										1					2		4	15		1		30
Carroll			5	7	1			11			1			2		4							6	4			34
Cecil			6	13		76							8	1			4	4	1	1			10	4	5		123
Charles		1	3	6			8						1	1			1			1			9	1			27
Dorchester		2	3	1	1			2		10	1		1		1	1	1	5	4		3	4	11		1		40
Frederick		1	4	8		1	1	3			34	1	1	1		7	4	2					20	9	1		82
Garrett		3	1	1								44		1									4	2			53
Harford	3		19	32	2	7	1					3	135	2		6	7	4					19	1			223
Howard	1		6	14	4				1			1		39		5	7	8					9				88
Kent			1	3											5								2		2		10
Montgomery	6	5	28	43	10	3	2	4	1	1	7	1	1	5		219	15	43	1		1		55	6	1		402
Out of State			1									2				1								1			5
Prince George's	8	2	37	52	1	3	8		2		4	6	1	1		38	17	305					88	4	1		484
Queen Anne's			1	3		1									1	2	2		9				1				16
Somerset			4	4				1							1		1	3		1			3		6	1	23
St. Mary's			2	9			2		6				9	1		3	4	8		23			9	2			69
Talbot			4	4	3	1											1					2	17				19
Unknown				3																							3
Washington		7	11	13							3	1	1			7	5	3					14	79			124
Wicomico			3	7						3	3					4		3			2		10	2	11		38
Worcester		1	1	7						2	1												2		8	7	27
Total	119	64	690	1,524	51	102	37	30	37	23	71	73	218	81	8	363	124	503	21	27	8	13	647	152	50	10	4,421

Number of Youth in Out-of-Home Placement as of January 1, 2022



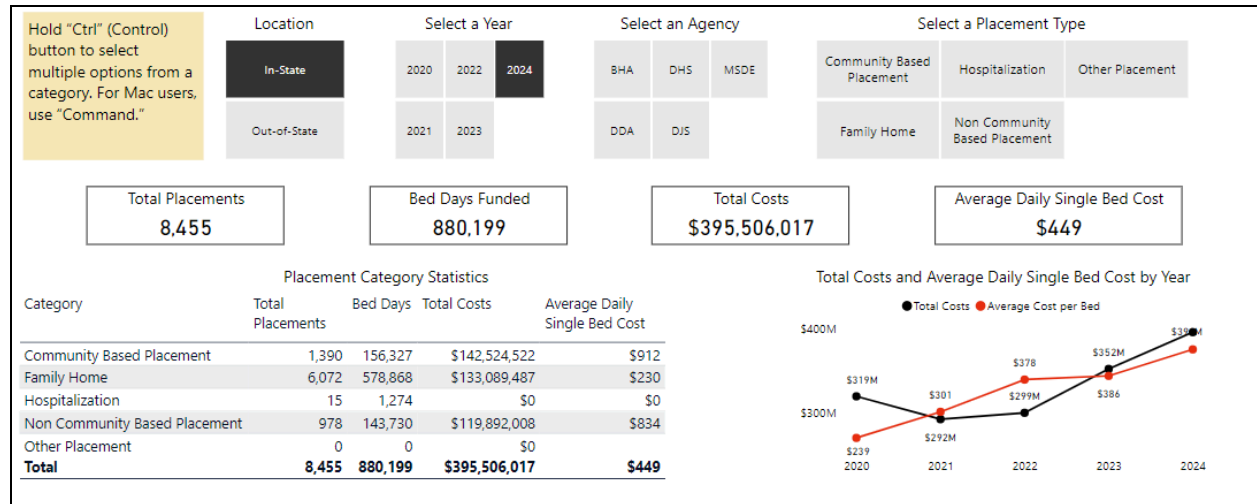
Youth Home County and Placement County

Home County	AA	AL	BA	BC	CA	CE	CH	CR	CV	DO	FR	GA	HA	HO	KE	MO	OOS	PG	QA	SM	SO	TA	UNK	WA	WI	WO	Total
Allegany		37	4	10			2			1					1	1	9	2					7	7			78
Anne Arundel	46	1	14	28	2	2	2	2		6	1	2	1	2	1	3	10	3	1				21	3	2		143
Baltimore	12	6	232	236	5	6	3	4	1	5	3	10	20	13	1	17	16	16	1			1	70	10	3	1	663
Baltimore City	49	11	309	990	1	1		9		6	14	11	24	21	1	25	21	66		1			154	4	7		1,667
Calvert		1	3	8			2		19					2		1	5	5		1			5	3			51
Caroline			1	2	21					1					1		1		1				5		3		33
Carroll	1		5	9	1		2	15	1		2				1	3		1					5	1			45
Cecil	1		11	10	3	63	1						11	2	1	2	8	2		1			10	2	3		128
Charles		1	1	12			17			1		1	1	1			3	1					7	1			42
Dorchester			5	3	2			1		3				2	3				5				5	1	2		31
Frederick			3	10		2		7			37	1		1		8	5	3					9	7			89
Garrett			1									24		1			4						9	2			39
Harford	2	4	28	27	2	5	1	1		1		1	114	1		6	7	3					19	3			212
Howard	5		9	13	3			1				1		25		4	4	6				1	7				76
Kent			1	2	1										4				1				1		1		9
Montgomery	8	2	31	42	9	6		3	1		9	2		5	1	212	10	40	1			1	36	3			404
Out of State			1							1	2	3				1	2										9
Prince George's	4	2	36	69	1	4	9	1	1	3	6	1	1	3	1	41	12	265		1	1		52	3			490
Queen Anne's				3												1	1	1	8				1	1			16
Somerset			5	3			1			2	1	1				3					2		1	1	7		24
St. Mary's	1		8	4			2		5		1		8	2		1	1	10		32			16	2			90
Talbot				4	2					3							2	2	2			8	7	1	1		27
Washington		5	7	11				1			1	3	1			2	5	4					6	59			100
Wicomico		5	4	5	1					2		1		2	1	1	1	2					4		11	2	39
Worcester			2	4				1		5	2	1	1			1	1								5	6	28
Total	129	75	721	1,505	53	90	42	46	28	40	79	63	182	83	17	333	128	432	20	36	3	11	457	114	45	9	4,530

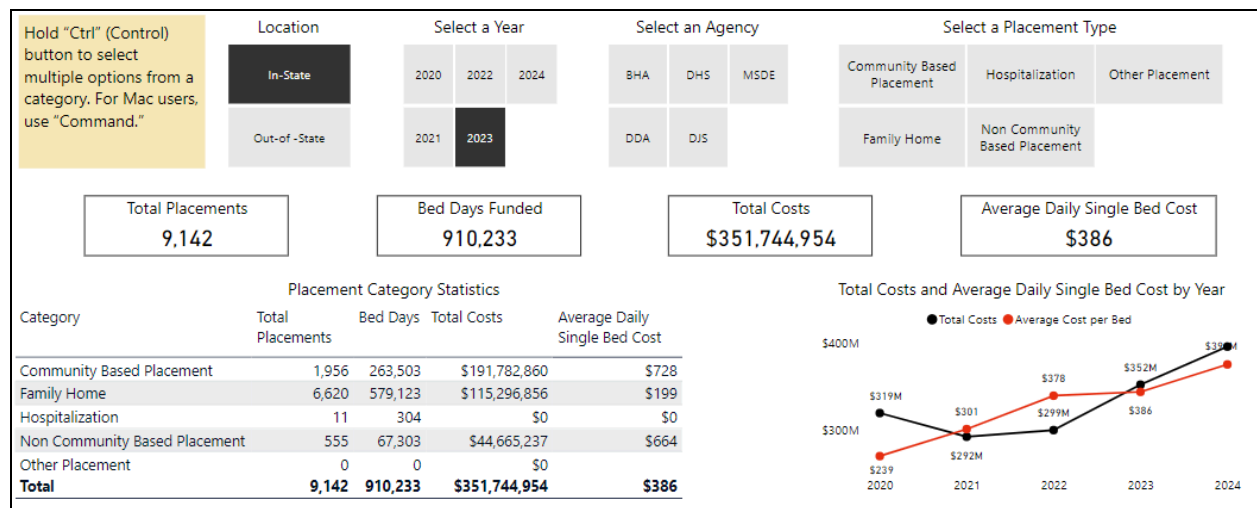
Costs Associated with Out-of-Home Placements for Fiscal 2024, 2023 and 2022

Please refer to the following illustrations as it relates to the costs associated with in-state placement and out-of-state placement.

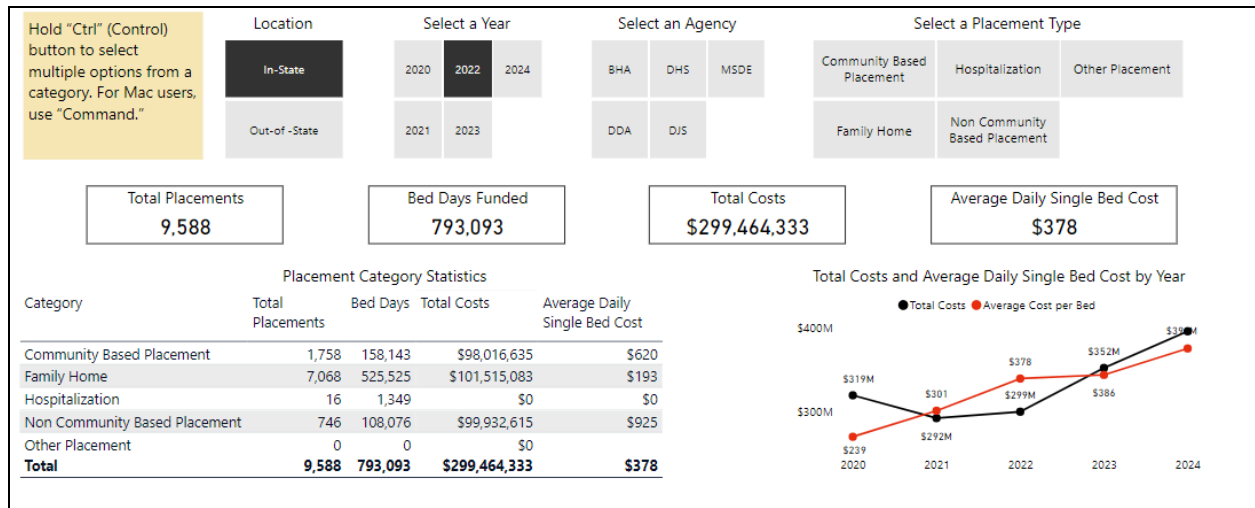
Costs Associated with In-State Placement (2024)



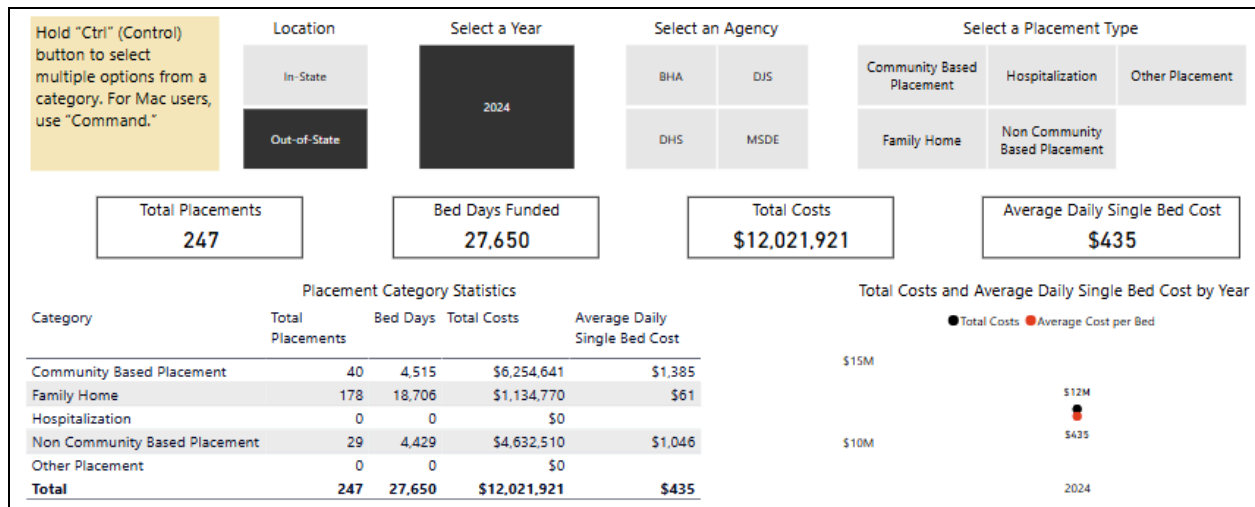
Costs Associated with In-State Placement (2023)



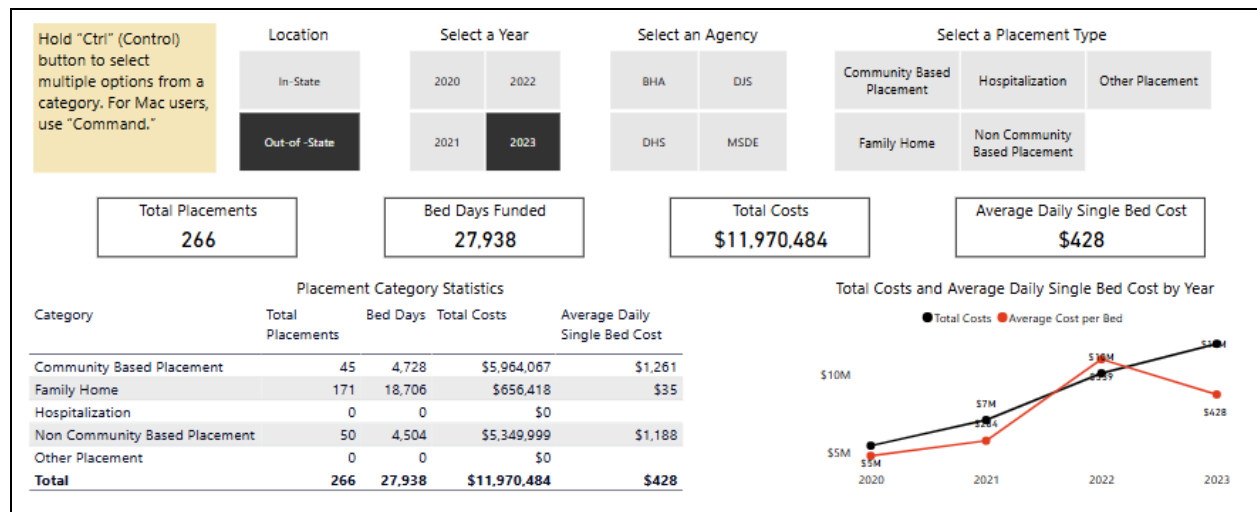
Costs Associated with In-State Placement (2022)



Costs Associated with Out-of-State Placement (2024)



Costs Associated with Out-of-State Placement (2023)



Costs Associated with Out-of-State Placement (2022)

