Collaboration / Agency Responsiveness to the Community

Maryland understands that it is essential to develop collaborations to help to support the success and implementation of its Child Welfare Services. Maryland has developed collaborations with sister agencies, stakeholders, non-profits, community organizations and the courts to review and improve outcomes for children. Input and collaboration is essential to ensure that children receive the services needed. Over the next five years Maryland will continue to engage in substantial, ongoing and meaningful collaborations with the stakeholder's identified in the following sections. Through these partnerships Maryland will identify and work toward shared goals and activities, assess outcomes, and develop strategic plans to increase the safety, permanency, and well-being of children in the child welfare system. Maryland's Children's Cabinet and The Child and Family Services Advisory Board (described below) will be the primary stakeholders groups where Maryland will review data, assess DHR's strengths and areas of improvement, and monitor and report progress on goals and objectives throughout the five year period.

Maryland Children's Cabinet

The *Maryland Child and Family Services Interagency Strategic Plan* was the culmination of an intensive, collaborative effort by the Maryland Children's Cabinet in partnership with families, communities, and providers to improve the child-family serving delivery system to better anticipate and respond to the needs of youth and families. This Cabinet meets monthly. In particular, the focus of the strategic planning effort was on those youth who are involved with or at-risk for involvement with multiple child-family serving agencies, based on the complexity of challenges facing children and families involved with more than one child-family serving agency.

Using five indicators of well-being to focus the work, a series of thoughtful and carefully constructed recommendations and strategies were generated under eight different themes. This Plan is shaping Maryland's interagency service delivery system to make it more family-driven, youth-guided, culturally and linguistically competent, and home- and community-based. Highlights of how this plan supports the work of the child welfare system specifically include:

- Family and Youth Partnership: Consistent with DHR's Family Involvement Meetings and Family Centered Practice Model, the Children's Cabinet supports having family voice and choice at each level of the service delivery system and involving family and youth whenever key decisions are made about their plan of care.

- Interagency Structures: Child and Family Team models of care planning (including Family Involvement Meetings) are recommended, and an effort is being undertaken to examine some of the interagency bodies that are used for children and youth with intensive needs—including voluntary placements—to better streamline them, make

them more efficient, and use some of the promising practices and service delivery approaches, such as Wraparound and CMEs for youth and families involved with multiple child-family serving agencies.

- Workforce Development and Training: The Children's Cabinet Agencies are working to identify the workforce core competencies in each of their respective training models to create a set of core competencies for the child-family serving system to include family and youth engagement and partnership, child development, safety and crisis planning, child maltreatment, systems/laws/mandates, accessing special education, family-centered practice models, and cultural competency. This will be particularly beneficial in improving quality and consistency for families who are involved with multiple child-family serving agencies.

- Information-Sharing: In conjunction with the information-sharing workgroup that is a priority of the O'Malley-Brown Administration, the information-sharing recommendations that came out of the Interagency Plan will assist in identifying and removing barriers to data-sharing that could improve service delivery, assist with resource development, or address systemic problems across agencies

- Improving Access to Opportunities and Care: Efforts to streamline access to care, to make access available in-person, telephonically, and over the internet, and to make sure that families do not have to "tell their story" time and again are all supportive of DHR's initiatives to improve access to care and have a Family Centered Practice Model.

- Continuum of Opportunities, Supports, and Care: Recommendations related to the availability of high quality family foster homes are consistent with DHR's Place Matters Initiative. Recommendations concerning EBPs and promising practices, as addressed above, bolster DHR's work to have data-driven decision-making and access to EBPs and promising practices.

- Financing: The Interagency Plan promotes the use of flexible funding and the CME model to support individualized plans of care. Through its Community Resource Specialists under the CME RFP, DHR is supporting the Family Involvement Meetings along with a more flexible model that is responsive to the individual strengths and needs presented by each child and family.

- Education: The work of DHR to create an Education Resource Manual for youth in out-of-home care in partnership with MSDE is highlighted in this section of the plan, along with the work that DHR has embarked upon with MSDE to support youth to remain in their home school system.

The Interagency Strategic Plan is a dynamic document, being implemented currently by the Children's Cabinet as a whole and individually. It reflects not only the goals, priorities and initiatives of the Children's Cabinet, but also those of the individual member Agencies,

including DHR. The Interagency Strategic Plan will be updated by the Children's Cabinet during SFY15.

SSA also participates on several standing Councils and Committees to ensure that stakeholders and courts are able to collaborate on goals and outcomes for children and to develop strategic plans for improvement. These Councils and Committees meet regularly to review the outcomes for children, assess services that are available and needed and to assist when needed in planning.

The Child and Family Services Advisory Board

The Child and Family Services Advisory Board formed in 2012. The membership consists of members from Casey Family Services, Provider Advisory Council, Maryland Department of Juvenile Services, The Family Tree of Maryland, Institute for Family Centered Services, Foster Care Court Improvement Project, Maryland Association of Social Services Directors, Casey Family Programs, University of Maryland School of Medicine, Maryland Foster Parent Association, Governor's Office for Children, Citizens Review Board for Children, Maryland State Department of Education, Department of Health and Mental Hygiene, Advocacy of Children and Youth, University of Maryland School of Social Work, Maryland Family Network, Local Departments of Social Services (LDSS) representatives from Anne Arundel, Frederick, and Wicomico counties, and Baltimore City and Social Services Administration's program managers. The Board meets bi-annually during the year to provide input for services, strategic planning, and assessing outcomes.

The Board provides input for:

- The Annual Progress and Services Review Plan, the progress made and the challenges ahead
- The Five-Year Child and Family Services Plan
- Strategies for programs

In 2013, the Board and invited guests participated in a meeting to review the IV-E Waiver Application process. The guests included providers, local management board members, sister state agencies, University of Maryland School of Medicine, and other DHR central and local staff. The participants provided input for the:

- Keys for successfully implementing a child welfare system that focuses on child well-being
- Interventions the State should consider for preventing children at risk
- Record evidence –based practices and promising practices throughout Maryland and nationwide
- Interventions the State should consider for post-permanency services
- Other types of services the State should consider

- Upcoming changes and progress in Maryland in regards to psychotropic medications
- Services offered to the 0-5 years-old population in Maryland.

The participants recommended several keys to successfully implementing a child welfare system that focuses on child well-being:

- Collaboration / sharing of information and data
- Focus on family well-being
- Very strong local system of care that is resourced adequately
- Should be for all families and communities with the understanding that one size does not fit / fix all
- All child services agencies to share responsibilities and commit to creative thinking to blend funding and incentivize providers to re-tool to deliver evidence based and trauma informed services that individualize plans of care
- To agree on a definition of well-being and how to measure it
- Non-traditional services for families; getting families what they need (often economic security type services)
- Public relations campaign to change the image of child welfare.

Recommended interventions for the State to consider:

- One size does not fit all
- Treatment needs to be informed by assessment (data)
- Family work should be done through trauma-informed lens
- Prioritize Evidence Based Practices that are family focused and target the needs – individual trauma – of our youth across the age continuum (using data) services
- Community empowerment model that leverages professionals and their services
- All systems touching families need to take a trauma informed approach to help identify triggers early
- Strong local partnerships with pathways for information sharing

Recommended interventions for the State to consider for post-permanency services:

- After care services
- One size does not fit all
- Treatment needs to be informed by assessment (data)
- View post permanency services as the same as preventive services
- Separate reunification from adoption and guardianship recidivism and therapy, identify EBP or Evidence Informed Practice such as CASE's – use data and outcomes
- Take the stigma out of asking for help by making ongoing support available
- Support a wraparound model that is robust, has a broad system of providers, who can respond timely (look at New Jersey)
- Families need post-permanency services
- Develop and make available a resource list websites, resources

SSA considered the recommendations during the Title IV-E waiver process and as input for the development of the Child and Family Services Plan for 2015-2019.

The Board also provided direct input to the 2014-2019 Five-Year Child and Family Services Plan during a regularly scheduled meeting. Recommendations were made to improve outcomes for children as well as data and concerns to review in the next five years.

SSA plans to continue to ask the Advisory Board for input on the progress made on children's issues. The Board has been an invaluable partner in exchanging ideas and informing the State of practices state- and nationwide.

Collaboration with Courts

Maryland has a strong partnership with the Foster Care Court Improvement Project (FCCIP). The SSA Executive Director sits as an active member of the FCCIP Implementation Committee. This is the venue by which input is also sought on planning activities. The Executive Director uses this forum to receive input from the FCCIP on the IV-E State Plan and to share the results and impact of the Title IV-E Federal Review and the annual Single Audit. FCCIP participated in an intense effort to address the concerns of the last Title IV-E Federal Review with members of the Judiciary statewide through regional trainings, site visits, and the work of its Permanency Planning Liaisons (PPLs). FCCIP was also a valuable contributor to the development of the CFSR PIP and the Child and Family Services Plan, as the state developed strategies to overcome barriers to permanency. They were members of the workgroup which developed the Permanency strategies in the CFSR PIP.

The FCCIP staff was involved in the implementation of the PIP. DHR consulted with them regarding changes to the concurrent permanency planning policy. As a result of this consultation a questionnaire was developed for the local departments regarding their current practice to include how the courts are implementing concurrent permanency practice.   In addition, small groups of local staff and FCCIP staff and a separate group of judges and masters were established to develop the key components for the revised concurrent permanency policy. The feedback from these sessions was incorporated into the revised policy.

The Department collaborated with the Foster Care Court Improvement Project to conduct outreach to improve the execution of Family Involvement Meetings (FIM) with particular emphasis on improving permanency outcomes and engaging youth.

Representatives of the Court also participate on councils and stakeholder groups, such as the Child and Family Services Advisory Board, the Alternative Response Council to provide

input for establishing measures and improving outcomes for children in the State of Maryland.

Citizen's Review Board –Adoption, Reunification and Another Planned Permanent Living Arrangement (APPLA) Reviews

The work of the Citizen's Review Board for Children (CRBC) is an important step to ensuring local departments are working towards permanency for Maryland's children. In accordance with an agreement reached between the Department of Human Resources (DHR) and the CRBC State Board, CRBC reviews cases of youth with a permanency plan of Adoption, Reunification or Another Planned Permanent Living Arrangement (APPLA) who met the criteria set out below. This focus allows CRBC to review these vulnerable and often overlooked populations. The CRBC submits individual case review reports to the local departments, as well as quarterly reports and an annual report to the Department regarding data from the reviews. The annual and quarterly reports are utilized by the Department to determine trends for local departments and to inform policy and practice changes. The annual and quarterly reports are made available to the local departments via DHR's intranet.

DHR efforts to address deficiencies identified in FY12 led to significant improvements in the outcomes for the children reviewed by CRBC in FY13. DHR will continue this collaboration with CRBC over the next five years to receive input to improving the outcomes for children.

Providers Advisory Council

Maryland Department of Human Resources (DHR) understands the significant role of its providers in serving children and families in the child welfare system. As such, DHR formed a Providers Advisory Council (PAC). The role of the PAC is to advise and make recommendations to the DHR Secretary regarding pertinent and critical child welfare issues.

The PAC includes both Residential Child Care (RCC) Agencies and Child Placement Agencies (CPA) representatives and is co-chaired by the Social Services Administration (SSA) and the Office of Licensing and Monitoring (OLM). The PAC meets on a bi-monthly, or more often if necessary, with the Executive Directors of SSA and OLM. The Council will continue to provide consultation to DHR in matters pertaining to services to children, policy relating to payment services, health, safety and well-being.

Maryland Family Network

Maryland Family Network (MFN), an independent non-profit organization is Maryland's lead agency for the Community-Based Child Abuse and Prevention (CBCAP) program. MFN is governed by a Board of Directors who, in matters related to the establishment and operation of the family support network, solicits input and feedback from parents and providers of the Family Support Center network and Early Head Start Policy Council. A parent and a representative of a local program are members of the Board. Via contracts, it acts as a fiscal and management intermediary between funders, most notably the State, and community-based providers. It provides fiscal support, grants management, technical assistance, training, and quality assurance to child abuse prevention programs throughout the State, known as Family Support Centers. MFN acts as liaison, partner and advocate with state agencies through participation on such decision-making state-sponsored bodies as the State Council on Child Abuse and Neglect (SCCAN), the State Advisory Council for Early Childhood Education and Care; the Department of Human Resources (DHR) Alternative Response Practice Workgroup, the Head Start State Collaboration Project; and the State Interagency Coordinating Council for Individuals with Disabilities Education Act (IDEA) Part C.

Maryland Resource Parent Association (MRPA): Legally known as Maryland Foster Parent Association (MFPA)

The MRPA partners with the State to serve, support, and educate Maryland's resource parents. A Resource Parent Ombudsman also is on the staff of the Secretary of the Department of Human Resources to work closely with MRPA and share identified issues and concerns with the Social Services Administration. An advertised telephone line is maintained and answered by MRPA members, which provides information for potential and current resource parents. MRPA also responds to general inquires from its web presence.

MRPA supports the development of local Resource Parent Associations and coordinates training opportunities and recognition events for its members. It serves as the liaison to the Social Services Administration to advocate for the rights and concerns of resource families and ensure responsiveness to resource family needs. To facilitate collaboration, the Ombudsman and a Department liaison attend and participate in MRPA Board of Directors meetings as well as MRPA activities to enlist the Association's input and support for the department's child welfare initiatives. As a result of the organizations' collective efforts, resource families are encouraged, supported and trained in providing safety, well-being, and permanence to children in out of home care.

MRPA will continue its partnership with the State of Maryland to serve and educate Maryland's resource parents. Having obtained tax exempt status as a 501(c) 3 non-profit organization, MRPA will continue to provide guidance and financial support to local

jurisdiction foster parent associations to maintain State incorporation status and achieve federal tax-exempt status. This will enable local associations to apply for grants to expand outreach to recruit and meet the service needs of local resource families.

MRPA will continue to offer education and training for Maryland resource parents in different geographical sections of the State.

Black Administrators in Child Welfare (BACW)

In 2013, the Department of Human Resources partnered with the Black Administrators in Child Welfare (BACW), the Council on Accreditation (COA) and Howard University's School of Social Work on a pilot project and research study funded by the Kellogg Foundation. The pilot project focused on strategies to reduce the overrepresentation of African American children in the foster care system by integrating the standards of accreditation from the to participate in the Racial Equity Strategy and Standards Integration Project (RESSIP) with the goal of identifying strategies and actions that could lead to the reduction of the number of children of color in the child welfare system.

Launched in January 2014, the evaluation phase is currently underway. Dr. Ruby Gourdine and Dr. Jacqueline Smith, researchers at Howard University School of Social Work, are conducting interviews of RESSIP participants to produce the evaluative research study, "The Impact of the Racial Equity Strategies and Standards Integration Pilot Project." The study will be complete in the summer of 2014.

Maryland Caregivers Support Coordinating Council
Established in 2001, the Maryland Caregivers Support Coordinating Council works to identify the needs and challenges faced by informal family caregivers for those across the lifespan, advocating for and empowering through policies that support them, and making recommendations for the coordination of services.

DHR is required to provide staff to the Council, which is legislatively mandated, as well as have two approved members. The Council's 17 members are appointed by the Governor and five (5) members specifically represent children and families via an organization or as a family caregiver of a child with a special need or disability. Over half of the remaining Council members are involved in organizations that serve or provide administrative oversight to both Adults and Family/Children's services. The Council plans to continue to work to identify partnerships with supporting organizations for collaboration, information and resource sharing to reduce boundaries for caregivers.

Developmental Disabilities Administration

The Department of Human Resources/Social Services Administration (DHR/SSA) and Department of Health and Mental Hygiene/Developmental Disabilities Administration

(DHMH/DDA) continue to be committed to maximizing the independence for people receiving State services and supports. The Memorandum of Understanding (MOU) entered into by both agencies to improve access to the continuum of resources available to children and vulnerable adults with developmental disabilities, providing appropriate services in a timely and efficient manner continues to be in effect. Both Departments are jointly responsible to communicate and coordinate in order to plan for the best possible services available for immediate and future needs.

Community Forums for Alternative Response

On May 2, 2012 Governor O'Malley signed into law a bill allowing DHR to implement a child protective services response to allegations of abuse and neglect that neglect that includes both a traditional response and an Alternative Response (AR).

In preparation for the implementation of Alternative Response, the legislation created an Alternative Response Advisory Council. The Council members include representatives from the Department of Health and Mental Hygiene, Maryland State Department of Education, legal counsel for children, local managing boards, America Academy of Pediatrics, Public Defender's Office, Children's Review Board, local departments of social services, State Council for Child abuse and Neglect, the Courts, and Casey Family Programs. The Council had four workgroups: Policy, Practice, Community Partners and Evaluation. Each workgroup had specific charges and deliverables. Each of the workgroups met on a regular basis to complete the necessary work to move forward the planning for the implementation of AR.

Stakeholder Input

Prior to Implementation for Alternative Response, the State held six community Forums for Alternative Response statewide during January 2013 – January 2104 to gather input from stakeholders on how services might change with the Alternative Response implementation, service gaps in their jurisdiction, and needs of children.   Stakeholders included Advocates for children CASA Volunteers, Children Service Providers, Citizens Review Board, Community Centers, Domestic Violence Centers, Faith Community, Family Service Providers, Foster Parents, Health Departments, Law Enforcement, Legal Community, including attorneys for children, parents, DSS and the Courts, Local Departments of Social Services, Local Governments, Local Management Boards, Medical Centers and Clinics, Mental Health, Psychologists and Therapists, Schools, Youth Service Providers. This input provided the base for a jurisdictional implementation plan. For additional details concerning Alternative Response, please refer to the Alternative Response section.

The Alternative Response Council will continue to meet on a regular basis during Implementation to assist with barriers to services and issues that may arise.

Social Services Administration Steering Committee

The Social Services Steering Committee is comprised of the Social Services Administration's Executive and Program staff, representatives of Local Departments of Social Services Directors and Assistant Directors and meets every other month.

SSA uses the Steering Committee as a forum to review policies, legislation and programmatic issues. The Committee is instrumental in providing SSA with input for programs and policies that impact child welfare.