

Martin O'Malley
Governor

Anthony Brown
Lt. Governor

Brenda Donald
Secretary

Date: June 26, 2009

To: Directors, Local Departments of Social Services
Assistant Directors for Services, Local Departments of Social services

From: Carnitra D. White, Executive Director
Social Services Administration

Re: Policy Directive SSA #10-05, Child Fatality/ Serious Physical injury/ Critical Incident

Please find attached the revised Policy Directive for Child Fatality/ Serious Physical Injury/ Critical Incident (CF/SPI/CI) response and reporting. The revision contains important changes over the current directive (SSA #08-14).

Please direct your attention to section IV.A.1.(a) on page 4 and B.1.(a) on page 12, which outlines a new protocol for notifying the Secretary and select staff about a FC/SPI/CI. The new policy instructs local directors to provide information, in a structured "heads up" email, within two hours of learning about a FC/SPI/CI. It's critical that the select information be provided in the order outlined in the policy, and within the body of an email as opposed to an attached form. The Secretary wants immediate notification regarding any CF/SPI/CI involving any child receiving child welfare services or who received child welfare services in the previous 12 months to the incident, irrespective of whether child abuse or neglect is suspected in the new event. Additionally, the new Policy Directive instructs local departments to forward all Follow-up Reports involving such incidents directly to the Secretary with a copy to the In-Home Services Manager at the Social Services Administration within 60 days of notification to the LD of the incident. Please review the new Directive closely as there are other changes as well.

Please note that hard copies will not follow. The Policy Directive has been posted on the SSA Net. Should you have questions, please direct them to the individuals listed on the cover page of the Policy Directive. Thank you.

cc: Wendy Chun-Hoon
Debbie Ramelmeier
Carmen Brown
Jill Taylor
Steve Berry

**Department of Human Resources
Social Services Administration
311 W. Saratoga Street
Baltimore, Maryland 21201**

DATE: June 26, 2009

Policy Directive: SSA #10-05

TO: Directors, Local Departments of Social Services, Assistant Directors for Services, Family Services Administrators, Supervisors, State Child Fatality Review Committee Members, Citizen Review Board Members and MD CHESSIE Staff

FROM: Carnitra D. White, Executive Director
Social Services Administration 

RE: Child Fatality/Serious Physical Injury/Critical Incident Protocol

PROGRAMS AFFECTED: All Family and Child Welfare Programs

ORIGINATING OFFICE: Children and Family Services

BACKGROUND: Supersedes Circular Letters #89-6, #98-6, #04-15 and #08-14

ACTION REQUIRED OF: All Children and Family Services, Administrators, Supervisors, and Caseworkers

REQUIRED ACTION: Compliance with the Requirements of the Child Fatality/Serious Physical Injuries/Critical Incident Protocol

ACTION DUE DATE: Immediately

CONTACT PERSONS: Steve Berry, Manager
In-Home Services (Child Protective Services (CPS) and In-Home Family Services (IHFS)
410-767-7018

Jill Taylor, Manager
Permanency Services
410-767-7695

Carmen Brown, Executive Director
Office of Licensing and Monitoring
410-767-7903

I. BACKGROUND:

- A. **National Child Abuse and Neglect Data System (NCANDS)** requires all states to collect data regarding child fatalities. To comply with NCANDS, SSA has revised its data collection process to ensure that we have procedures that ensure that: (1) All phases of the investigation are completed in a timely fashion; (2) Investigators have access to complete information in order to make accurate findings; (3) Administrative staff are kept fully apprised of the status of the investigations; (4) Information is appropriately shared with the media; and (5) Policy and program decisions are based on data gathered about child abuse and neglect fatalities.
- B. **SB 529 – Child Abuse or Neglect – Disclosure of Information** became law in October 1998, prompting the addition of the term “serious physical injury”, which is a clarification of critical incident and authorizing the Director of a local department of social services (LD) or the Secretary of the Department of Human Resources (*DHR*) to disclose specified information concerning child abuse or neglect when the following conditions are met:
1. The Director or the Secretary determines that disclosure is not contrary to the best interests of the child, the child’s siblings, or other children in the household, family, or care of the alleged abuser or neglector.
 2. The alleged abuser or neglector has been charged with a crime related to a report of child abuse or neglect; and
 3. The child named in a report of abuse or neglect has died or suffered a serious physical injury.

II. **PURPOSE**

- A. This policy directive updates and clarifies the Children and Family Services’ protocol for In-Home and Out-of-Home Placement Staff and forms; clearly delineates statistical information to be collected; clarifies reporting timelines for LDs; and addresses the disclosure of information related to child fatality / serious physical injury /critical incident situations. In addition, this directive offers guidance in responding to the media and addressing secondary trauma. The protocol addresses these issues by providing a framework for a clear, concise and uniform response to child fatality, serious physical injury, and critical incidents across all jurisdictions.
- B. This policy directive is formatted so that the reader need only read the portions of Section III that fit the child fatality/serious physical injury/critical incident (CF/SPI/CI) brought to the attention of their LD.
1. Section IV A. addresses situations where there is suspicion that child abuse or neglect may be a contributing factor in the incident regardless of whether the family is receiving service or has a child welfare history. (page 4)
 2. Section IV B. addresses situations where there is an open or recently closed (within the past 12 months) child welfare case and there is no suspicion that child abuse or neglect may be a contributing factor in the incident. (page12)
 3. Section IV C. addresses situations where there is no child welfare history and no suspicion that child maltreatment contributed to the incident. (page 19)
- C. All other sections of this policy directive apply to all situations as appropriate. In situations where an incident is reported to DHR/SSA as a SPI/CI that eventually

results in the child's death, a new process should be initiated following the appropriate guidance given in section in III.

- D. Standard Operating Procedures (SOP) shall be developed by each LD addressing the notification of local staff, supervisors, administrators, assistant directors and directors, when a CF/SPI/CI occurs when the family is involved in an open child welfare case or received child welfare services within 12 months of the incident. The director or designee from each LD shall submit a copy of the SOP to the Executive Director of the Social Services Administration (SSA). SOPs must be reviewed on an annual basis. Any modifications to the SOP must be submitted to the SSA Executive Director to be incorporated into to the plan maintained at SSA.

III. DEFINITIONS

- A. **Child** means a person after birth until his or her 18th birthday, or any child committed to the agency that is under the age of 21.
- B. **Child and Family Services or child welfare** is any in-home or out-of-home service.
- C. **Child fatality / serious physical injury /critical incident** (CF/SPI/CI) refers to any of the situations defined below.
- D. **Critical incident cases** include child abuse or neglect investigations of an event that occurred in-home or in an out-of-home placement that, for a variety of different reasons, are likely to prompt media attention.
- E. **Fatality cases** include the death of any child where there is suspicion that child abuse or neglect, foul play, or inappropriate care contributed to the death of the child.
- F. **In-Home Services** refers to Child Protective Services Investigation, Child Protective Continuing Services, Family Preservation (all categories) and Family Services (all categories).
- G. **Investigation** refers to a child protective services investigation as defined in Maryland Family Law § 5-706.
- H. **Media Crisis Team** is a broad-based team of individuals both internal and external to the LD with various perspectives. The purpose of the team is to assist with the development of the optimal plan for providing the media with information about the incident. In high profile situations, the team should include the local director, local communications (Public Information) officer, law enforcement/State's Attorney, Secretary of the Department or designee, SSA Executive Director or designee, and the Director of DHR's Office of Communication.
- I. **Out-of-Home Placement** means placement of a child into foster care, kinship care, group care, or residential treatment care.

- J. **Rapid Response Team** is a team of individuals, chaired at the assistant director for services level or above that coordinates all activities at the local level when the LD receives notification of a Child Fatality/Serious Physical Injury/Critical Incident. This is especially important for those cases involving a family currently receiving child welfare services or that has received child welfare services within the past 12 months. The chair is responsible for convening the first and all subsequent meetings of the team.
- K. **Review or Case Review** refers to a non Child Protective Services assessment during which the LD makes no determination of child abuse or neglect.
- L. **Secondary Trauma** is the indirect exposure to trauma through a first hand account or narrative of a traumatic event. The emotional, physical, and psychological effect of secondary trauma can threaten staff's competency and personal well-being.
- M. **Serious Physical Injury Cases** are cases where child abuse or neglect is suspected to be a contributing factor in an injury that: (1) creates a substantial risk of death; (2) causes permanent or protracted disfigurement; (3) causes permanent or protracted loss of the function of any bodily member or organ; or (4) causes permanent or protracted impairment of the function of any bodily member or organ.
- N. **Supervisor/Worker Case Conference** is a meeting during which the supervisor meets with the investigative worker for the purpose of guiding the investigation and determining what immediate actions will be taken to protect any surviving children and the service needs of the family.

IV. CHILD FATALITIES / SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT PROCESS

- A. **All CF/SPI/CI where child abuse or neglect is suspected to be a contributing factor regardless of whether the family is receiving services or has a child welfare history.**
 - 1. **The LD shall take the following actions:**
 - (a) **Notify the DHR Secretary and other DHR Staff** -Within 2 hours of the LD becoming aware of a CF/SPI/CI where child abuse or neglect is suspected and there is an active or recently closed child welfare case (within the past 12 months), notify by email the Secretary of Human Resources, the Deputy Secretary for Programs, the Executive Director for SSA, the Director of Child Welfare Practice and Policy, the Director of the Office of Communications, and the Manager for In-Home Services. If the child or family is not known to the Department, it is not necessary to notify the Secretary, Deputy Secretary of Programs or the Director of the Office of Communications. All others are to receive notification. It is understood that initial information may be limited and inaccurate. The following information in an ordered manner that can be offered with a reasonable level of confidence should be included in the body of the (not an attachment) e-mail:
 - (i) Child's name;

- (ii) Jurisdiction where the child lives and location if different from that of the incident;
 - (iii) Type of case – specify whether case is 1) Active CPS, 2) Active In-Home, 3) Active Out-of-Home or 4) Closed child welfare case within the past 12 months.
 - (iv) Child’s gender, age and/or date of birth;
 - (v) Date of CF/SPI/CI;
 - (vi) Any known child welfare history with the child or family; and
 - (vii) A brief and concise narrative explaining what happened to the child, what steps the LD has taken thus far, and the future course of action.
- (b) **Generate and Complete DHR/SSA Intake Worksheet (DHR/SSA 396 – Attachment 1)** – Immediately (within 2 hours), LD screening supervisor shall complete and distribute the Intake Worksheet (DHR/SSA 396 – Attachment 1) to the assigned supervisor and worker and chair of the Rapid Response Team;
- (i) Within 24 hours or one business day, the LD shall notify DHR/SSA via email of the completion of DHR/SSA 396, which will prompt the policy analyst to access a copy of the 396 from MD CHESSIE.
 - (ii) The LD will ensure that the case is promptly entered as a Child Protective Services Investigation on MD CHESSIE.
- (c) **Conduct a supervisor/worker case conference** –The supervisor shall assign the investigation and hold a case conference with investigating worker to plan the investigation/ intervention.
- (i) The supervisor must discuss the case with the assigned worker within 2 hours of being notified of the CF/SPI/CI and review information included in the Intake Worksheet (DHR/SSA 396-attachment -1) and any other additional information gathered by the supervisor or worker (history, policy report, etc.).
 - (ii) The supervisor and worker will plan subsequent case conferences to include the following activities:
 1. The completion of all required clearances (CIS, MD CHESSIE);
 2. Planning for an assessment of immediate safety needs of other children in the household (including their removal if necessary);
 3. Planning for an assessment of the long term risk factors;
 4. Determining the service needs of family members of the victim;
 5. Developing a plan to coordinate the delivery of direct services and resources based on the above assessment;
 6. Making a timely entry of case information into MD CHESSIE; and
 7. Planning for the timely reporting to SSA (Initial, Interim and Follow-up reports)
- (d) **Respond to the Scene** – Within 2 hours of receipt of the notification of the CF/SPI/CI in cases where child abuse or neglect is suspected, the Local Department shall send a child protective services worker to the scene of the incident. The immediate response is for the purpose of taking all necessary actions to protect the safety of any children in the household

and to begin the process of gathering information to determine if child abuse or neglect was a contributing factor in the incident. A CPS investigative worker should conduct the abuse or neglect investigation with the family at the time of the CF/SPI/CI incident even if the case is already open in another child welfare service. If the family is currently the subject of a CPS investigation the new allegation should be investigated by the same worker.

- (e) **Assemble the Rapid Response Team** – The LD will convene a team meeting to be chaired at the Assistant Director level or above.
- (i) Chair immediately notifies the local director of incident.
 - (ii) Team meets within 1 business day of receiving notification of the child death to plan and begin the local review of the case including all past case activity, plans for safety of other children, determining whether to continue use of an Out-of-Home placement, and the need for and planning the local media response. The team is responsible for ensuring all required notifications are made and for writing the initial (within 4 business days), interim (within 2 calendar weeks of notification of incident) and final (no more than 60 days following notification of incident) CF/SPI/CI reports.
 - (iii) All individuals within the agency who have knowledge of the family should participate on the team, including both In-Home and Out-of-Home staff and supervisors. The Foster Home or Private Agency caseworker and supervisor may be included if applicable. At that meeting the following should be discussed and documented. If the information is not available, a clear plan of action should be established to secure any missing information:
 1. What was reported?
 2. How does the information reported match with what actually happened?
 3. Was there an open or prior case, and what was the agency's involvement?
 4. Concerning open or prior cases, what factors influenced the agency's actions?
 5. What are the lessons learned from previous agency involvement with the family that would guide and assist with developing an effective safety plan for any children in the family?
 6. Why were the other child(ren) left in the household/removed from the household?
 7. What is the extent of any court involvement?
 8. What is the extent of any police involvement? (If the police have charged the alleged abuser/neglector relating to the incident, the LD should follow the protocol of notifying the Secretary of DHR of the situation.)
 9. What is the extent of any media involvement?
 10. What is the medical examiner's preliminary finding?
 11. What are the secondary trauma supports needs of staff?
 - (iv) The review should also:
 1. Ensure the timely completion of Safety and Risk Assessments;
 2. Allow for the coordination of information collection necessary for completion of the risk assessment;

3. Assist with the identification of the victim and family's service needs based on the above-mentioned assessments; and
 4. Coordinate the local media response. Note: If an arrest has taken place, the LD must generate the Disclosure of Child Abuse and Neglect Information Report (DHR/SSA 407 – Attachment 2). This disclosure can only be made by the Secretary or the Local Director and, then, only after consultation with the local State's Attorney.
- (v) In cases where the child(ren) were in an Out-of-Home placement, the Rapid Response Team should include in the review a determination regarding any children in the home at the time of the incident and a recommendation regarding the continued use of the foster home pursuant to COMAR 07.02.25.15. No additional children may be placed in or with the private or public agency; foster home, group home, shelter, or residential treatment program pending the outcome of the CPS investigation. The recommendation should be submitted to the Local Director or designee, who has 5 business days to make a determination as to the continued use of the foster home.

Notes and any supplemental information from the Rapid Response Review shall be recorded. Information from team meetings shall be maintained and when appropriate used to prepare the required initial, interim and final fatality reports. Copies of meeting notes generated should be attached when forwarding these reports to the Local Director or designee and the SSA Executive Director.

1. **The LD shall complete and submit the following reports:**
 - (a) **The Initial Child Fatality/Serious Physical Injury/Critical Incident Report** (DHR/SSA Form 1080A – Attachment 3) -Within 4 business days, the LD shall submit an CF/SPI/CI report via form 1080A, attaching minutes from the initial Rapid Response Team meeting to the SSA In-Home Services Manager (or designee). The report should be submitted via fax or e-mail. If desired, a hard copy may be sent as follow-up to: SSA In-Home Services Manager, Social Services Administration, 311 W. Saratoga Street, 5th Floor, Baltimore, Maryland 21201. The In-Home Services Manager will disseminate the report as appropriate.
 - (b) **Completion of the Interim Child Fatality/ Serious Injury/Critical Incident Report** - Whenever a CF/SPI/CI investigation takes place, an Interim CF/SPI/CI report shall be submitted within 2 weeks of the incident. This is a narrative-style report that should include an update of the findings and recommendations made at any previous Rapid Response Team meetings. The report should be submitted via fax or e-mail. If desired, a hard copy may be sent as follow-up to: SSA In-Home Services Manager, Social Services Administration, 311 W. Saratoga Street, 5th Floor, Baltimore, Maryland 21201. The In-Home Services Manager will disseminate the report as appropriate.
 - (c) **Completion of the Follow-up Child Fatality/Serious Physical Injury/Critical Incident Report** (DHR/SSA 1080B – Attachment 4)- whenever a CF/SPI/CI investigation takes place, within 60 days, the LD shall submit a Final CF/SPI/CI report, via the 1080B, to the **Secretary of**

the Department of Human Resources and copy the SSA In-Home Services Manager (or designee). It is extremely important to submit this report on time as it serves as the tool for informing the Governor's staff on the circumstances of the incident. Although the Medical Examiner's report will not always be available within 60 days, the LD's 60 day report (Follow-up/Final 1080B) must be submitted. The 1080B report, supplemented with copies of the Child Abuse/Neglect Disposition Report (DHR/SSA 181-A, M, & N – *Attachment 5*), notes from any interagency team meetings, and any police and autopsy reports can be submitted via fax, e-mail (where possible) or U.S Mail. The In-Home Services Manager will disseminate the report as appropriate.

- (d) When a child dies suddenly and unexpectedly, the local law enforcement agency and the medical examiner's office will conduct a thorough assessment to determine the cause and manner of death. The LD CPS Unit is responsible for obtaining any information to be included in the agency investigation, such as police and autopsy reports. The LD shall establish relationships with law enforcement and the medical examiner's office for purposes of securing copies of these reports.
- (e) If additional information is obtained after the 60 day period, a supplemental report shall be submitted to the SSA In-Home Services Manager who will disseminate it as appropriate.

2. The LD shall have a Media Response Protocol

- (a) **Media Response Protocol** - Each LD shall design a Media Response Protocol based on the policies of their local government, the State of Maryland's confidentiality laws, and the need for continuous communication between local and state communications representatives. A copy of the protocol shall be submitted to the In-Home Services Manager at the Social Services Administration. The Local Director or a designee shall review the protocol annually (based on the calendar year). Any changes shall be submitted to the In-Home Services Manager at the Social Services Administration.
- (b) **Media Crisis Team** - The Secretary and/or the Director of Communications shall convene a Media Crisis Team to assess a CF/CI/SPI or any incident involving the maltreatment of a child that has the potential to receive media attention and begin to coordinate communication. If the Media Crisis Team is not convened, the local director shall follow the LD's protocol for media response. The local director may contact the State's Office of Communication when assistance is needed. The Media Crisis Team will be comprised of:
 - (i) Secretary or designee;
 - (ii) State Communications Director;
 - (iii) State Deputy Secretary of Programs;
 - (iv) SSA Executive Director;
 - (v) LD Director;
 - (vi) Office of the Attorney General;
 - (vii) Rapid Response Team Chair; and
 - (viii) Other personnel, including local communications staff and attorneys, will be added to this core team as needed.
- (c) The Media Crisis Team (*the Team*) shall identify a spokesperson. Ideally, this should be the person most knowledgeable about the incident.

However, when identifying the spokesperson, the Team should take into consideration:

- i. The person's comfort level working with the media;
 - ii. The person's ability to communicate effectively; and
 - iii. The degree of public concern. This would determine the level of the spokesperson (the Secretary, Deputy Secretary, Local Director, etc.).
- (d) The Team shall develop a briefing document containing a summary statement of the situation. If the briefing document is to be shared with the media, it should balance the public's right to know and concerns for the privacy and security of involved parties. The document shall be reviewed by local law enforcement, the local State's Attorney and the Office of the Attorney General prior to any release.
- (e) The Team shall determine what other key constituencies should be informed of the incident, including the Governor's Office. Close attention should be paid to confidentiality laws and regulations when determining who can be informed and to what degree.
- (f) The Team shall determine if a press conference will be held or if a press release will be issued. The State Communications Director or a designee, working with the Local Director, will take the lead in setting up press conferences. If a press conference is to be held, the Team will facilitate the completion of the "Disclosure of Child Abuse/Neglect Information" report (*DHR/SSA 407, Attachment 2*) and distribute it to the appropriate person(s).
- (g) Considerations for Preparing Media Responses:
- (i) When possible, in statements/interviews, refer to the child by his/her first name. The public must know that the Department does not consider the child to be just another case.
 - (ii) Be mindful of the confidentiality issues related to the situation, sharing as much information as legally possible.
 - (iii) Every incident affects DHR, the LD, and the workers and supervisors who worked with the child. It is important for our statements to convey an institutional and personal sense of loss while expressing sympathy for family members and others affected.
 - (iv) Be proactive in sharing available information.
 - (v) Be responsive and available to the media.

3. The LD is Responsible for the following Notifications:

- (a) Notification of the Director's Decision Concerning the Continued Use of a Facility: Within five business days after receiving the recommendation from the Rapid Response Team regarding private or public foster homes, group homes, shelters, or residential treatment facilities, the LD director or the director's designee shall render a written decision as to the continued use of the placement. A copy of that decision shall be mailed to:
- (i) Foster parent;
 - (ii) Child's attorney;
 - (iii) Private child placement agency, if applicable;
 - (iv) SSA; and
 - (v) Office of Licensing and Monitoring, if applicable.
- (b) Notification of Appropriate Parties when a Family is Receiving In-Home Services: The active Child and Family Services caseworker shall

coordinate with the CPS investigative worker to notify within 5 business days if applicable, the:

- (i) Courts;
- (ii) Child's attorney; and
- (iii) Service providers if arranged by the LD.

(c) **Note:** The active Child and Family Services Worker must immediately offer all appropriate services or assistance and/or refer the family to community support services qualified to assist the family with issues related to burial, grief and loss.

(d) **Notification of appropriate parties of children in an Out-of-Home Placement (OHP) setting:** The active OHP worker may exchange information with other caseworkers or a child placement agency regarding: action taken concerning the foster home, any information having a bearing on the safety of children in the home, and the disposition of the child abuse or neglect investigation. The investigator, the caseworkers for the children, and the foster home worker shall communicate throughout the investigation. Within 2 business days, the active OHP caseworker shall coordinate with the CPS investigative worker to notify the following parties of the CF/SP/CI:

- (i) Child's parents, unless the child sustained an injury in which case notification must be made immediately or where such notification is contrary to the child's best interest;
- (ii) The applicable courts;
- (iii) Child's legal representative;
- (iv) Caseworkers for other children living in the OHP Setting;
- (v) SSA's Contracts Unit and the Office of Licensing and Monitoring, if the child resides in a private or public agency foster home, group home, including a shelter, or residential treatment program;
- (vi) The child placement agency, in cases where the home is licensed by a child placement agency; and
- (vii) The resource worker for the home, in cases where the home is approved by the LD.

Note: To the extent feasible, the investigation should be coordinated with the resource worker and the caseworkers for children in the home when applicable.

(e) **Notification of appropriate parties of children who are under a juvenile court order but who are not in the physical custody of the LD:** In the case of a CF/SPI/CI where child abuse or neglect is suspected in an active child welfare case and the child is under a protective court order, a CPS investigative worker shall begin the process of ensuring the safety of remaining children in the household and gathering information to validate the report. The active Children and Family Services worker shall offer all appropriate services or assistance needed and/or refer the family to community support services qualified to assist the family with issues related to burial, grief, and loss. The active Children and Family Services caseworker shall coordinate with the CPS investigative worker to notify the following parties within 5 business days:

- (i) The child's legal representative (if applicable);
- (ii) The applicable courts; and
- (iii) Caseworkers for other children living in an Out-of-Home Placement (OHP) setting (if applicable).

- (f) **Notification of Investigation Disposition:** Upon completion of the Child Abuse/Neglect Disposition Report (DHR/SSA 181-A, M, & N), the investigative worker shall place a copy of the notification in the child's record and notify the following parties of the disposition in writing:
 - (i) The alleged maltreater;
 - (ii) Child's attorney, if applicable;
 - (iii) Private child placement agency, if the alleged maltreater was an employee and the act involved a current or past resident of the agency; and
 - (iv) SSA.

4. **The LD shall take into Consideration:**

- (a) **Inter-agency Multidisciplinary Team Meetings:** At the discretion of the LD, staff may participate in an interagency team meeting, either in person or by teleconference, to share information with other public/private agencies that were involved with the deceased/seriously injured/critically injured child. The benefits of such reviews include: improved interagency case management; identification of service gaps; identification of systemic failures in agencies protecting children; and the development of data information systems that can guide protocols and policies for agencies serving families and children.
- (b) **Secondary Trauma -** Staff working with clients who are primary victims of a CF/SPI/CI may experience secondary trauma. The emotional, physical, and psychological effects of secondary trauma may mirror the effects of primary trauma, and threaten staff's competency and personal well-being. Secondary trauma may affect all levels of staff including clerks and management.

Each LD shall develop policy for responses to crisis situations. Such policies should include options for how and when staff uses the Employee Assistance Program (EAP), the supports of a collegial debriefing team, and psychological assessment of a worker's emotional or behavioral symptoms. Secondary trauma should be dealt with on an individual, unit, and agency-wide level. Building an agency's capacity to respond to staff needs in this area is a critical and an ongoing part of the Department of Human Resource's mission. The early period after the critical incident, from 2 days to 2 weeks is the most important time frame for responding to secondary trauma. Supervisors must play a key part in facilitating the provision of personal and unit support during traumatic events.

LDs shall implement ongoing educational and support activities to help cope with the accumulative and long-range effects of secondary traumatic stress. Efforts shall be made to discuss and implement local protocols including an annual agency wide presentation on different aspects of secondary trauma and its impact. A local resource list should be updated annually with local contacts, both inside and outside of the agency, to assist in addressing secondary trauma.

DHR will assist by making available resources to supplement local secondary trauma efforts. LDs should contact the In-Home Services Manager at DHR/SSA to access these resources.

B. In a CF/SPI/CI where a family is currently receiving Child and Family Services or has had a Child and Family Services Case Closed Within the Last Twelve Months and No Child Maltreatment is suspected.

1. The LD shall take the following actions:

(a) **Notify DHR Secretary and other DHR Staff** -Within 2 hours of the LD becoming aware of a CF/SPI/CI involving a child in an active or recently closed (last 12 months) child welfare case, even when no maltreatment is suspected, notify by e-mail the Secretary of Human Resources, the Deputy Secretary for Programs, the Executive Director for SSA, the Director of Child Welfare Practice and Policy, the Director of the Office of Communications, and the Manager for In-Home Services. It is understood that initial information may be limited and inaccurate. The following information that can be offered in an ordered manner with a reasonable level of confidence should be included in the body (not an attachment) of the e-mail:

- (i) Child's name;
- (ii) Jurisdiction where the child lives and location if different from that of the incident;
- (iii) Type of case – specify whether case is 1) Active CPS, 2) Active In-Home, 3) Active Out-of-Home or 4) Closed child welfare case within the past 12 months.
- (iv) Child's gender, age and/or date of birth;
- (v) Date of CF/SPI/CI;
- (vi) Any known child welfare history with the child or family; and
- (vii) A brief and concise narrative explaining what happened to the child, what steps the LD has taken thus far, and the future course of action.

(b) **Generate and distribute (DHR/SSA Intake Worksheet**

(DHR/SSA 396 – *Attachment 1*) Immediately (within 2 hours) the LD screening worker shall complete and distribute the Intake Worksheet (DHR/SSA 396 – *Attachment 1*) to assigned supervisor and worker and chair of the Rapid Response Team.

- (i) The Intake Worksheet is used when a report is made to the LD regarding a CF/SPI/CI Incident.
- (ii) An Intake Worksheet must be completed, whether or not Child Protective Services (CPS) investigates the incident. If accepted for investigation, a DHR/SSA 396 shall immediately be shared with the supervisor and worker assigned to complete the investigation. All screened-in and screened-out Intake Worksheets regarding CF/SPI/CI shall be shared with the chair of the Rapid Response Team for approval of the screening decision. All open child welfare cases and those closed within 12 months of the CF/SPI/CI must have a contact from the Department even if child maltreatment is not suspected. This could be to provide service to the family and/or explore the nature of the death. If screened out for investigation the incident should be entered in MD CHESSIE as a non-cps and DHR/SSA 396 generated.
- (iii) Within 24 hours or 1 business day, the LD shall notify DHR/SSA via email of the completion of the 396, which will prompt the policy analyst to access a copy of the 396 from MD CHESSIE.

- (iv) The LD assigned CPS or other Intake worker shall enter the case on MD CHESSIE as an investigation if accepted as such or a non-cps if not accepted for investigation.
- (c) **Conduct a supervisor/worker case conference** – The supervisor shall assign the investigation or assessment and hold a case conference with investigating or other intake worker to plan the investigation/ intervention.
 - (i) The supervisor must discuss the case with the assigned worker within 2 hours of being notified of the CF/SPI/CI and review information included in the Intake Worksheet (DHR/SSA 396-*attachment -1*) and any other additional information gathered by the supervisor or worker (history, policy report, etc.).
 - (ii) The supervisor and worker will plan subsequent case conferences to include the following activities:
 1. The completion of all required clearances (CIS, MD CHESSIE);
 2. Planning for an assessment of immediate safety needs of other children in the household (including their removal if necessary);
 3. Planning for an assessment of the long term risk factors;
 4. Determining the service needs of family members of the victim;
 5. Developing a plan to coordinate the delivery of direct services and resources based on the above assessment;
 6. Making a timely entry of case information into MD CHESSIE; and
 7. Planning for the timely reporting to SSA (Initial, Interim and Follow-up reports)
- (a) **Respond to the Scene** – Within 24 hours of receipt of the notification of the CF/SPI/CI in cases where child abuse or neglect is not suspected but there is an active or recently closed child welfare case (within the last 12 months), the LD shall send a child protective services or other intake worker to the scene of the incident. The immediate response is for the purpose of taking all necessary actions to protect the safety of any children in the household and to provide supportive services to the family. If the family is receiving a child welfare service at the time of the incident, the worker providing the service should make the contact unless the LD determines that assigning the contact to a different worker is beneficial. If the family is currently the subject of a CPS investigation the contact should be made by the same worker.
- (b) **Assemble the Rapid Response Team** – The LD will convene a team to be chaired at the Assistant Director level or above.
 - (i) Chair immediately notifies the local director of the incident.
 - (ii) Team meets within 1 business day of receiving notification of the child death to plan and begin the local review of the case including all past case activity, plans for safety of other children if needed, determining whether to continue use of an Out of Home placement, and the need for and planning the local media response. The team is responsible for ensuring all required notifications are made and for writing the initial (within 4 business days), interim (within 2 calendar weeks of notification of the incident) and final

(no more than 60 days following notification of the child incident)
CF/SPI/CI reports.

- (iii) All individuals within the agency who have knowledge of the family should participate on the team, including both In-Home and Out-of-Home staff and supervisors. The Foster Home or Private Agency caseworker and supervisor maybe included if applicable. At that meeting the following should be discussed and documented. If the information is not available, a clear plan of action should be established to secure any missing information:
1. What was reported?
 2. How does the information reported match with what actually happened?
 3. Was there an open or prior case, and what was the agency's involvement?
 4. Concerning open or prior cases, what factors influenced the agency's actions?
 5. What are the lessons learned from previous agency involvement with the family that would guide and assist with developing an effective safety plan for any children in the family?
 6. Why were the other child(ren) left in the household/removed from the household?
 7. What is the extent of any court involvement?
 8. What is the extent of any police involvement? (If the police have charged an individual relating to the incident even though child abuse or neglect is not suspected, the LD should follow the protocol of notifying the Secretary of DHR of the situation.)
 9. What is the extent of any media involvement?
 10. What is the medical examiner's preliminary finding?
 11. What are the secondary trauma supports needs of staff?
- (iv) The review should also:
1. Ensure the timely completion of Safety and Risk Assessments where appropriate;
 2. Allow for the coordination of information collection necessary for completion of the risk assessment;
 3. Assist with the identification of the victim and family's service needs based on the above-mentioned assessments; and
 4. Coordinate the local media response. Note: If an arrest has taken place, the LD must generate the Disclosure of Child Abuse and Neglect Information Report (DHR/SSA 407 – *Attachment 2*). This disclosure can only be made by the Secretary or the Local Director and, then, only after consultation with the local State's Attorney.
- (v) In cases where the child(ren) were in an out-of home placement, the Rapid Response Team should include in the review a determination regarding any other children in the home and a recommendation regarding the continued use of the foster home pursuant to COMAR 07.02.25.15. No additional children may be placed in or with the private or public agency foster home, group home, shelter, or residential treatment program pending a full

understanding of the incident. The recommendation should be submitted to the Local Director or designee, who has 5 business days to make a determination as to the continued use of the foster home.

- (vi) Notes and any supplemental information from the Rapid Response Review shall be recorded. Information from team meetings shall be maintained and when appropriate used to prepare the required initial, interim and final fatality reports. Copies of meeting notes generated should be attached when forwarding these reports to the Local Director or designee and the SSA Executive Director.

2. **The LD shall complete and submit the following reports:**

- (a) **The Initial Child Fatality/Serious Physical Injury/Critical Incident Report (DHR/SSA Form 1080A – Attachment 3)** - Within 4 business days, the LD shall submit an CF/SPI/CI report via form 1080A, attaching minutes from the initial Rapid Response Team meeting to the SSA In-Home Services Manager (or designee). The report should be submitted via fax or e-mail. If desired, a hard copy may be sent as follow-up to: SSA In-Home Services Manager, Social Services Administration, 311 W. Saratoga Street, 5th Floor, Baltimore, Maryland 21201. The In-Home Services Manager will disseminate the report as appropriate.
- (b) **Completion of the Interim Child Fatality/ Serious Injury/Critical Incident Report** - An Interim CF/SPI/CI report shall be submitted within 2 weeks of the incident. This is a narrative-style report that shall include an update of the findings and recommendations made at any previous Rapid Response Team meetings. The report may be submitted via fax or e-mail. If desired, a hard copy may be sent as follow-up to: SSA In-Home Services Manager, Social Services Administration, 311 W. Saratoga Street, 5th Floor, Baltimore, Maryland 21201. The In-Home Services Manager will disseminate the report as appropriate.
- (c) **Completion of the Follow-up Child Fatality/Serious Physical Injury/Critical Incident Report (DHR/SSA 1080B – Attachment 4)**- Within 60 days, the LD shall submit a Final CF/SPI/CI report, via the 1080B, to the **Secretary of the Department of Human Resources** and copy the SSA In-Home Services Manager (or designee). It is extremely important to submit this report on time as it is used to inform the Secretary and the Governor's staff on the circumstances of the incident. Although the Medical Examiner's report will not always be available within 60 days, the LD's 60 day report (Follow-up/Final 1080B) must be submitted. The 1080B report, supplemented with copies of the Child Abuse/Neglect Disposition Report (DHR/SSA 181-A, M, & N – Attachment 5), notes from any interagency team meetings, and any police and autopsy reports can be submitted via fax, e-mail (where possible) or U.S Mail. The In-Home Services Manager will disseminate the report as appropriate.
- (d) When a child dies suddenly and unexpectedly, the local law enforcement agency and the medical examiner's office will conduct a thorough assessment to determine the cause and manner of death. The LD CPS or other In-Home Services worker is responsible for obtaining any information to be included in the agency investigation or assessment, such as police and autopsy reports. The LD shall establish relationships with

law enforcement and the medical examiner's office for purposes of securing copies of these reports.

- (e) If additional information is obtained after the 60 day period, a supplemental report shall be submitted to SSA In-Home Services. The In-Home Services Manager will disseminate the report as appropriate.

3. The LD shall have a Media Response Protocol

- (a) **Media Response Protocol** - Each LD shall design a Media Response Protocol based on the policies of their local government, the State of Maryland's confidentiality laws, and the need for continuous communication between local and state communications representatives. A copy of the protocol shall be submitted to the In-Home Services Manager at the Social Services Administration. The Local Director or a designee shall review the protocol annually (based on the calendar year). All changes shall be submitted to the In-Home Services Manager at the Social Services Administration.
- (b) **Media Crisis Team** - The Secretary and/or the Director of Communications may, depending on the circumstances, convene a Media Crisis Team to assess a CF/CI/SPI or any incident involving a child that has the potential to receive media attention and begin to coordinate communication. If the Media Crisis Team is not convened, the local director shall follow the LD's protocol for media response. The local director may contact the State's Office of Communication when assistance is needed. The Media Crisis Team will be comprised of:
 - (i) Secretary or designee;
 - (ii) State Communications Director;
 - (iii) State Deputy Secretary of Programs;
 - (iv) SSA Executive Director;
 - (v) LD Director;
 - (vi) Office of the Attorney General;
 - (vii) Rapid Response Team Chair; and
 - (viii) Other personnel, including local communications staff and attorneys, will be added to this core team as needed.
- (c) The Media Crisis Team (*the Team*) shall identify a spokesperson. Ideally, this should be the person most knowledgeable about the incident. However, when identifying the spokesperson, the Team should take into consideration:
 - (i) The person's comfort level working with the media;
 - (ii) The person's ability to communicate effectively; and
 - (iii) The degree of public concern. This would determine the level of the spokesperson (the Secretary, Deputy Secretary, Local Director, etc.).
- (d) The Team shall develop a briefing document containing a summary statement of the situation. If the briefing document is to be shared with the media, it should balance the public's right to know and concerns for privacy and security of involved parties. The document shall be reviewed by local law enforcement, local State's Attorney and the Office of the Attorney General.
- (e) The Team shall determine what other key constituencies should be informed of the incident, including the Governor's Office. Close attention

should be paid to confidentiality laws and regulations when determining who and to what degree an individual can be informed.

- (f) The Team shall determine if a press conference will be held or if a press release will be issued. The State Communications Director or a designee, working with the Local Director, will take the lead on setting up press conferences. If a press conference is to be held, the Team will facilitate the completion of the “Disclosure of Child Abuse/Neglect Information” report (*DHR/SSA 407*) and distribute it to the appropriate person(s).
- (g) Considerations for Preparing Media Responses:
 - (i) When possible, in statements/interviews, refer to the child by his/her first name. The public must know that the Department does not consider the victim to be just another case.
 - (ii) Be mindful of the confidentiality issues related to the situation, sharing as much information as legally possible.
 - (iii) Every incident affects DHR, the LD, and the workers and supervisors who worked with the child. It is important for our statements to convey an institutional and personal sense of concern while expressing sympathy for family members and others affected.
 - (iv) Be proactive in sharing available information.
 - (v) Be responsive and available to the media.

4. **The LD is Responsible for the following Notifications:**

- (a) **Notification of the Director’s Decision Concerning the Continued Use of a Facility:** Within 5 business days after receiving the recommendation from the Rapid Response Team regarding private or public foster homes, group homes, shelters, or residential treatment facilities, the LD director or the director’s designee shall render a written decision as to the continued use of the placement. A copy of that decision shall be mailed to:
 - (i) Foster parent;
 - (ii) Child’s attorney;
 - (iii) Private child placement agency, if applicable;
 - (iv) SSA; and
 - (v) Office of Licensing and Monitoring, if applicable.
- (b) **Notification of Appropriate Parties when a Family is Receiving In-Home Services:** The active Child and Family Services caseworker shall notify within 5 business days if applicable, the:
 - (i) Courts;
 - (ii) Child’s attorney; and
 - (iii) Service providers if arranged by the LD.
 - (iv) **Note:** In the event of a fatality the active Child and Family Services Worker must immediately offer all appropriate services or assistance and/or refer the family to community support services qualified to assist the family with issues related to burial, grief and loss.
- (c) **Notification of appropriate parties of children in an Out-of-Home Placement (OHP) setting:** The active OHP worker may exchange information with other caseworkers or a child placement agency regarding: action taken concerning the foster home, any information having a bearing on the safety of children in the home, and the outcome of the assessment. The investigator/intake worker if different then the active

Child and Family Services worker, the caseworkers for the children and the foster home worker shall communicate throughout the investigation/assessment. Within 2 business days the active OHP caseworker shall coordinate with the investigative/intake worker to notify the following parties of the CF/SPI/CI:

- (i) Child's parents, unless the child sustained an injury in which case notification must be made immediately or where such notification is contrary to the child's best interest;
- (ii) The applicable courts;
- (iii) Child's legal representative;
- (iv) Caseworkers for other children living in the OHP Setting;
- (v) SSA's Contracts Unit and the Office of Licensing and Monitoring, if the child resides in a private or public agency foster home, group home, including a shelter, or residential treatment program;
- (vi) The child placement agency, in cases where the home is licensed by a child placement agency; and
- (vii) The resource worker for the home, in cases where the home is approved by the LD.
- (viii) Note: To the extent feasible, the investigation/assessment should be coordinated with the resource worker and the caseworkers for children in the home when applicable.

(d) Notification of appropriate parties of children who are under a juvenile court order but who are not in the physical custody of the LD: In the case of a CF/SPI/CI where child abuse or neglect is not suspected of being a contributing factor in an active child welfare case and the child is under a protective court order, the active Children and Family Services worker shall begin the process of ensuring the safety of remaining children in the household. The active Children and Family Services worker shall offer all appropriate services or assistance needed and/or in the event of a fatality refer the family to community support services qualified to assist the family with issues related to burial, grief, and loss. The active Children and Family Services caseworker shall notify the following parties within five business days:

- (i) The child's legal representative (if applicable);
- (ii) The applicable courts; and
- (iii) Caseworkers for other children living in an Out-of-Home Placement (OHP) setting (if applicable).

5. The LD shall take into Consideration:

- (a) **Inter-agency Multidisciplinary Team Meetings:** At the discretion of the LD, staff may participate in an interagency team meeting, either in person or by teleconference, to share information with other public/private agencies that were involved with the deceased/seriously injured/critically injured child. The benefits of such reviews include: improved interagency case management; identification of service gaps; identification of systemic failures in agencies protecting children; and, the development of data information systems that can guide protocols and policies for agencies serving families and children.
- (b) **Secondary Trauma** - Staff working with clients who are primary victims of a CF/SPI/CI may experience secondary trauma. The emotional, physical, and psychological effects of secondary trauma may mirror the

effects of primary trauma, and threaten staff's competency and personal well-being. Secondary trauma may affect all levels of staff including clerks and management even when child abuse or neglect is not a contributing factor in the death.

- (i) Each LD should develop policy for responses to crisis situations. Such policies should include options for how and when staff uses the Employee Assistance Program (EAP), the supports of a collegial debriefing team, and psychological assessment of a worker's emotional or behavioral symptoms. Secondary trauma should be dealt with on an individual, unit, and agency-wide level. Building an agency's capacity to respond to staff needs in this area is a critical and an ongoing part of the Department of Human Resource's mission. The early period after the critical incident, from 2 days to 2 weeks is the most important time frame for response to secondary trauma. Supervisors must play a key part in facilitating the provision of personal and unit support during traumatic events.
- (ii) LDs shall implement ongoing educational and support activities to help cope proactively with the accumulative and long-range effects of secondary traumatic stress. Efforts shall be made to discuss and implement local protocols including an annual agency wide presentation on different aspects of secondary trauma and its impact. A local resource list should be updated annually with local contacts, both inside and outside of the agency, to assist in addressing secondary trauma.
- (iii) The DHR will assist by making available resources to supplement local secondary trauma efforts. LDs should contact the In-Home Services Manager at DHR/SSA to access these resources.

C. In a CF/SPI/CI where there is no current Child Welfare Service and No Child Welfare Cases Have Been Closed Within the Last Twelve Months and No Child Maltreatment is Suspected.

1. The LD will take the following actions:

- (a) **Notify SSA Executive Director and other DHR Staff** – Within 24 hours of the LD becoming aware of a CF/SPI/CI where the child and family is not known to the Department (no active or recently closed child welfare case within the last 12 months), and no child maltreatment is suspected but the LD determines that a review of the fatality should be initiated, notify the Executive Director for SSA, the Director of Child Welfare Practice and Policy, and the Manager for In-Home Services via email. It is understood that initially, information may be limited and inaccurate. The following information that can be offered with a reasonable level of confidence should be included in the body of the e-mail (not an attachment):
 - (i) Child's name;
 - (ii) Jurisdiction where the child lives and location if different from that of the incident;

- (iii) Child's gender, age and/or date of birth;
- (iv) Date of CF/SPI/CI;
- (v) Any known child welfare history with the child or family; and
- (vi) A brief and concise narrative explaining what happened to the child, what steps the LD has taken thus far, and the future course of action.

(b) **Generate and distribute DHR/SSA Intake Worksheet (DHR/SSA 396 – Attachment 1)** – Immediately (within 2 hours) the local screening supervisor will complete and distribute the Intake Worksheet (DHR/SSA 396 – attachment 1) to chair of the Rapid Response Team.

- (i) An Intake Worksheet must be completed, whether or not Child Protective Services (CPS) investigates the incident. All screened-in and screened-out Intake Worksheets regarding CF/SPI/CI shall be shared with the chair of the Rapid Response Team.
- (ii) If the chair of the Team determines that a fatality review is warranted, he/she returns DHR 396 to the LD screening unit indicating a need for the review and the review process should follow that outlined in Section IV B of this directive.
- (iii) Within 24 hours or one business day the LD shall notify DHR/SSA via email of the completion of the 396, which will prompt the policy analyst to access a copy of the 396 from MD CHESSIE.

(c) **Rapid Response Team** – LD will determine the need to convene a Team. If a Team is convened it will be chaired at the Assistant Director level or above.

- (i) Chair determines the need to assemble the Rapid Response Team even though no maltreatment is suspected and there is no active or recently closed (within the last 12 months) Child and Family Services case; or
- (ii) The Chair determines no investigation or review is to be conducted, no further action is required.

2. **The LD shall complete and submit the following reports if an investigation or review is initiated (given the importance of these reports this portion of section III A. and B. is repeated here):**

- (a) **The Initial Child Fatality/Serious Physical Injury/Critical Incident Report (DHR/SSA Form 1080A – Attachment 3)** -Within 4 business days, the LD shall submit an CF/SPI/CI report via form 1080A, attaching minutes from the initial Rapid Response Team meeting to the SSA In-Home Services Manager (or designee). The report should be submitted via fax or e-mail. If desired, a hard copy may be sent as follow-up to: SSA In-Home Services Manager, Social Services Administration, 311 W. Saratoga Street, 5th Floor, Baltimore, Maryland 21201. The In-Home Services Manager will disseminate the report as appropriate.
- (b) **Completion of the Interim Child Fatality/ Serious Injury/Critical Incident Report** - Whenever a CF/SPI/CI review takes place, an Interim CF/SPI/CI report shall be submitted within 2 weeks of the incident. This is a narrative-style report that should include an update of the findings and recommendations made at any previous Rapid Response Team meetings.

The report should be submitted via fax or e-mail. If desired, a hard copy may be sent as follow-up to: SSA In-Home Services Manager, Social Services Administration, 311 W. Saratoga Street, 5th Floor, Baltimore, Maryland 21201. The In-Home Services Manager will disseminate the report as appropriate.

(c) **Completion of the Follow-up Child Fatality/Serious Physical Injury/Critical Incident Report (DHR/SSA 1080B – Attachment 4)**- Whenever a CF/SPI/CI review takes place the LD shall submit a Final CF/SPI/CI report within 60 days, via the 1080B, to the SSA In-Home Services Manager (or designee). The In-Home Services Manager will disseminate the report as appropriate. It is extremely important to submit this report on time as it serves as the tool for informing the Secretary and the Governor's staff on the circumstances of the incident.

3. If a LD initiates a review when no maltreatment is suspected and there is no active or recently closed (within the last 12 months) Child and Family Services case, all appropriate procedures found in section III B. in addition to those found in item 2 immediately above should be followed.

IV. Social Services Administration (SSA) Activities

A. The Social Services Administration may:

1. **Complete a Final Report** when an incident involves a child who is currently receiving or recently received (within last 12 months) a Child and Family Services or, when requested by the Secretary, SSA Executive Director, Director for Child Welfare Practice and Policy, or the Manager for In-Home Services. The SSA In-Home policy analyst shall prepare a follow-up CF/SPI/CI Incident Report. The report shall be based on the LD's follow-up CF/SPI/CI Incident, 181-A, M, & N reports (*Attachment 5*), data maintained in MD CHESSIE, and any available supplemental reports. The report shall be completed and distributed to the Secretary, SSA Executive Director, Director for Child Welfare Practice and Policy, and all appropriate DHR Central Office administrators. The purpose of the follow-up report is to inform the parties of the outcome of the abuse and neglect investigation. Oftentimes, at the time of the State Review, the abuse and neglect investigation of the incident has not yet been completed.
2. **Conduct State Level Review of Cases** which are independent evaluations of all CF/SPI/CI where a child has been identified in an open or recently closed (within last 12 months) Child and Family Services case, and maltreatment issues have been identified. The goal of a State Level Review is to ensure compliance with established policy and ensure that the highest possible quality of service is provided. Other cases may be reviewed at the discretion of the Secretary, SSA Executive Director, Director for Child Welfare Practice and Policy, and the In-Home Services Manager.
 - (a) The purpose of a Social Services Administration review of a CF/SPI/CI case is to examine the facts surrounding the incident involving the child or the child's family where child welfare services have been provided and to identify areas for improvement in policy and practice in Maryland. The review shall not be limited to events involving the LD's involvement with the family and reviewer(s) are encouraged to speak with any community service providers involved with the family, to the extent possible.
 - (b) State Level Reviews may be expedited using one of three methods:

- (ii) Use of a “Peer Approach” using other workers and supervisors from other LDs. An In-home policy analyst would serve as lead; and
- (iii) Use of an independent agency through a contractual arrangement.
- (c) Whatever the method chosen, the reviewer(s), under the direction of the Manager for In-Home Services or a designee, shall develop a report that must be delivered to the SSA Executive Director and the Director of Child Welfare Practice and Policy within 30 calendar days from the assignment of the Review. The SSA Executive Director shall forward the report to the Secretary. Once the appropriate administrators within DHR have reviewed and approved the report, the director of the LD shall receive a copy.
- (d) The Local Director has 10 days to review the report and respond with comments before the report is finalized. The LD has 30 days from receipt of the final report to submit a corrective action plan.

3. Collect, Analyze, Disseminate and Maintain Data

- (a) Information collected from various reports, State Level Reviews, and MD CHESSE, that reflect both qualitative and quantitative data pertaining to CF/SPI/CI shall be for purpose of directing and improving Child Welfare Services.
- (b) An annual report shall be completed for dissemination to the Legislature, Secretary of DHR, and other appropriate State officials and DHR staff as requested.
- (c) Data will be disseminated to The National Child Abuse and Neglect Data System (NCANDS), and other surveys, as deemed appropriate.
- (d) Specialized reports shall be completed upon request of the Manager for In-Home Services at SSA.
- (e) Additionally SSA will produce reports as required for State Stat, and quarterly reports for the Secretary on new child fatalities, those under review or investigation and those that are finalized.
- (f) Copies of the reports shall be maintained at SSA.

4. Provide Support and Resources to the LD of Social Services. The In-Home Services Staff shall be available to the Local Departments of Social Services for purposes of providing:

- (i) Technical support during any phase of an incident/investigation/assessment;
- (ii) Consultation during case staffings and/or Team Reviews;
- (iii) Assistance with identifying facilitators and/or providers of service for secondary trauma support;
- (iv) Monetary support in securing secondary trauma services, initial training, and continuing education;
- (v) Data upon request; and
- (vi) The CF/SPI/CI Protocol.