



UNIVERSITY OF MARYLAND SCHOOL OF SOCIAL WORK
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Findings from the 2007 Local Supervisory Review

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Description of Local Supervisory Review Data

The Local Supervisory Review (LSR) provides an opportunity for supervisors to conduct a structured review of in-home and out-of-home cases in order to assess compliance with state and federal mandates. The process began in January of 2007 to meet Maryland Program Improvement Plan (PIP) requirements and to meet Council on Accreditation (COA) standards for supervisory review.

Under the LSR, each local department receives a randomly selected sample of two in-home and two out-of-home cases to review each month. The supervisor assigned to the case conducts a structured review using the *Local Supervisory, Peer, and Citizens Review Instrument for Child Welfare Services*. Supervisors use a paper instrument to respond *yes, no, or not applicable* to over 200 items that assesses compliance with state and federal regulations and evaluate quality of practice. The completed instrument is mailed to the Quality Assurance unit at DHR/SSA. As part of the Child Welfare Accountability contract, research staff at UMB/SSW entered the data into statistical management software for analysis. As of December 31 2007, a total of 590 reviews from all 24 jurisdictions were completed and entered into the dataset for use in this report. The findings from these reviews are presented here, organized by the child welfare outcomes of safety, permanency, and well-being.

Cautions and Caveats

Quality assurance activities are designed to provide an in-depth review of a sample of in-home and out-of-home cases. Assessment of in-depth qualitative indicators of child welfare service performance necessarily limits the size of the sample. Although cases are randomly selected from the population, the overall sample sizes are not sufficient to ensure that the findings represent the population of children from which these samples are drawn.

Data obtained through the LSR should be interpreted with caution due to challenges with the LSR instrument and data collection system. A full discussion of these challenges and plans to rectify them is provided in the report, *Child Welfare Accountability, Evaluating Quality Assurance Processes in Maryland (2007)*. For the purpose of this report, there are two main concerns.

1. Completion rates for each local department ranged from 7% to 118%. In 2007, most jurisdictions should have each completed 36 instruments. Six jurisdictions (Anne Arundel County, Baltimore City, Baltimore County, Caroline County, Harford County and Montgomery County) piloting the revised Local Supervisory Review Instrument were responsible for completing 28 instruments. However, local departments varied in their actual completion rates. Appendix A summarizes the number of LSR cases received for each jurisdiction.

2. There is a large amount of missing data in "completed" instruments where supervisors did not rate certain items or items were not applicable in the selected cases.

Differential response rates by jurisdiction and large amounts of missing data suggest the possibility for systematic bias in the estimates generated in these analyses. Non-random bias can reduce the precision of the results. Findings should be interpreted with caution.

Explanation of the Tables

Each of the tables included in this report are broken down by outcome area, listing the sample size and the percent of responses in the affirmative for each item. For example, the first item in "Table 1. Investigations" has a sample size of 162. This means that the "Face-to-face contact with the victims" item was completed for 162 cases submitted in 2007. Out of the 162 respondents, 96% of those answered positively that there was, in fact, face-to-face contact with the victims. The sample size fluctuates from item to item depending upon the number of applicable cases for each item. Data are further broken down by region in the tables in Appendix B.

Child Safety

The local supervisory review assesses safety outcomes with items pertaining to the Child and Family Services Review (CFSR) safety outcomes 1 and 2. It also includes items assessing whether or not the case was conducted in compliance with Maryland timeframes and other mandates. Findings for each of these items are discussed in turn.

Safety 1: Children are, first and foremost, protected from abuse and neglect

Four items were assessed for Safety 1. These items and their results are presented in Table 1, below.

Table 1. Investigations	N	%
Face-to-face contact with victims	162	96
Documented attempts at contact with victims	47	96
Face-to-face contact with all children in household	143	89
Documented attempts at contact with all children in household	34	82

Findings from the LSR suggest that 96% of victims and 89% of all children in the household were seen face-to-face during the investigation. When victims and other children could not be seen during investigation, the case record documented attempts to contact 96% of victims and 82% of other children in the household.

Safety 2: Children are safely maintained in their homes whenever possible and appropriate

Nine items were assessed for Safety 2. Results of these items are presented in Tables 2 and 3, below.

Safety/Risk Assessment and Planning

Table 2. Risk/Safety Assessment and Planning	N	%
Adequate safety assessment completed	441	92
Adequate risk assessment completed	382	89
Safety plan developed according to policy	199	95
Evidence of efforts to reduce risk of harm	244	99

Data from the Local Supervisory Review suggest that Maryland is inconsistent in completing adequate safety and risk assessments and developing safety plans according to policy. Adequate safety assessments were completed in 92% of applicable cases. Adequate risk assessments were completed in 89% of cases. Based on these assessments, safety plans were developed according to policy in 95% of cases. Maryland workers seem to be taking necessary steps to reduce the risk of harm to children, as evidenced by efforts to reduce risks in 99% of cases.

Services to Reduce Risk of Harm

Table 3. Services to Reduce Risk of Harm	N	%
Services appropriate to needs/risks identified	327	99
Services available and accessible	324	99
Services tailored to culture, language, developmental level	313	99
Services use appropriate family resources	306	100
Documentation of outcome of interventions and services	264	97

According to the Local Supervisory Review, Maryland consistently provided services to reduce the risk of harm to children in most jurisdictions. Supervisors indicated that services provided were appropriate to the needs/risks identified, available and accessible, and tailored to culture, language, and developmental level in 99% of cases. Services consistently utilized appropriate family resources. The outcomes of interventions and services were properly documented in 97% of cases.

Child Permanency

The local supervisory review assesses permanency outcomes using items in two categories. It includes items used to assess the stability, goal consistency, location, resources, and other important aspects of child placement. Outcome findings are discussed below.

Permanency 1: Children have permanency and stability in their living situations

Thirty one items were used in the assessment of Permanency 1. These items and their results are presented in Tables 4 - 7, below.

Case Plan/Service Agreement

Table 4. Case Plan/Service Agreement	N	%
Case plan and service agreement within 60 days of entering OOH	206	96
Case plan and service agreement updated within 6 months of entry	226	93
Case plan and service agreement updated every 6 months	210	88
Service agreement identify primary permanency goal	260	95
Service agreement identify secondary permanency goal	234	92
Service agreement consistent with permanency goals	249	96
Service agreement complete	253	85

According to the Local Supervisory Review, case plans and service agreements in Maryland are generally completed within 60 days of entering out-of-home care. These are updated within 6 months of entry and updated every 6 months thereafter in the majority of cases. Supervisors indicate that service agreements are generally of adequate quality. Namely, service agreements identify primary and secondary permanency goals and service plans are consistent with these goals in most cases. 85% of cases had completed service agreements.

Permanency Planning

	N	%
Current placement meeting child's needs	263	98
Current placement is stable	254	97
Permanency goals in child's best interest	250	99
Child's best interest to continue current plan	176	94
Caregiver informed about child's history and permanency plan	246	99
Reasonable efforts toward primary permanency goal	270	99
Reasonable efforts toward secondary permanency goal	234	93
Permanency goal achieved within 12 months	168	43

LSR data indicate that statewide, Maryland provided stable placements that met children's needs. Supervisors indicated that permanency goals were in the child's best interest in almost every case reviewed. Caregivers were generally informed about the child's history and permanency plan. Statewide, reasonable efforts were made toward achieving both primary and secondary goals. Supervisors indicated that it was in the child's best interest to continue with the current plan in 94% of cases. The child's permanency goal was achieved within 12 months in only 43% of applicable cases statewide.

Termination of Parental Rights (TPR)

Table 6. Termination of Parental Rights (TPR)	N	%
TPR filed	138	55
Case file documents compelling reason for not filing	76	84
TPR filed within 30 days of Court approval of change of plan to adoption	69	65
TPR filed within 60 days of decision to file petition	55	69
TPR decision rendered within 180 days	63	57
Delay due to issuance of show cause order	18	17
Delay due to scheduling of hearing	22	50
Delay due to postponement of hearing	23	39
Delay due to insufficient search for absent parent	18	6
Delay due to court requiring search beyond statute	18	6
Delay due to publication	17	6
Delay due to lack of prompt court decision	20	30
LDSS should have requested waiver of reunification services	184	6

LSR data suggest that TPR petitions may not be filed in a timely manner even when circumstances suggest that it is necessary. Based on the LSR data, a TPR was filed in a little more than half of applicable cases.

In cases where TPR was not filed within state mandates, 84% of applicable cases had a compelling reason documented in the case file. TPRs were filed within 30 days of Court approval of the change of plan to adopt in 65% of cases, and within 60 days of the decision to file a petition in 69% of cases.

LSR data also suggest delays in receiving decisions in a timely manner. A decision regarding a TPR was rendered within 180 days in only 57% of cases. The most commonly cited reasons for delay were scheduling of hearing (50%), postponement of hearing (39%), and lack of prompt court decision (30%). Delays due to insufficient search for an absent parent, the court requiring search beyond statute, and publications were minimal.

Adoption

Table 7. Adoption	N	%
Evidence of life book	79	80
Child registered with MARE	18	72
Child registered with AdoptUsKids	17	41
Signed copy of the social summary in child's record	49	59
Family receiving appropriate services to meet needs of each child	68	97

According to the Local Supervisory Review data, adoption promotion activities are inconsistent across the state. Most cases (80%) had evidence of a life book. 72% of children were registered with MARE; less than half (41%) of children were registered with AdoptUsKids. Just over half (59%) of cases had a signed copy of the social summary in the child's record. Almost all families reported receiving appropriate services to meet the needs of each child in their care.

Permanency 2: The continuity of family relationships is preserved for children

Fifty-seven items were used to assess Permanency 2. The data from these items and their analysis are presented below in the following Tables 8 -11.

Preservation of Primary Connections

	N	%
Placement in close proximity to parent/guardian	213	60
Reason for placement location related to case goals	108	97
Siblings in same OOH placement	129	53
Reasonable efforts to place siblings together	67	94
Clinical or compelling reason for separation	75	89
Primary connections of child preserved in OOH placements	220	94
Consider maternal relatives as placement resource	223	99
Consider paternal relatives as placement resource	213	95

Data from the Local Supervisory Review suggest that Maryland is working to preserve children’s primary connections in out-of-home care when making placement decisions. Although only 60% of cases reported that placement was in close proximity to the child’s parent/guardian, almost all of the cases not in close proximity were placed in order to meet case goals.

Similarly, although siblings were placed in the same out-of-home placement in just over half of all applicable cases, most cases where siblings were not placed together involved reasonable efforts to do so or clinical or compelling reasons for separation.

Maternal and paternal relatives were considered as placement resources at about equal rates in almost all cases. Paternal relatives were considered as placement resources in 95% of cases compared to consideration of maternal relatives in 99% of cases.

Supervisors indicated that primary connections of the child were preserved in nearly all cases, a finding fairly consistent across the state.

Visitation

	N	%
Visitation plan supports relationship with parent/guardian	206	87
Visitation plan supports relationship with siblings	105	85
Visitation meets needs of children	212	91
Visitation reflects movement toward achieving permanency plan	178	87
All parties have a copy of visitation plan	188	78
Documentation for the absence of visitation plan	78	85
Visitation in accordance with plan for parents/guardians	188	85
Visitation in accordance with plan for siblings	95	88
Documentation of reasonable efforts to facilitate visitation	218	95
Efforts to address lack of compliance with visitation plan	122	85

Appropriate use of visitation is another way that child welfare workers can maintain and preserve primary connections for children in out-of-home care. Visitation findings vary considerably between jurisdictions, suggesting that there is not consistency in visitation practice statewide. Analysis of state LSR data suggests that, in most cases reviewed, visitation plans: supported the child's relationship with parents/guardians (87%) and siblings (85%), reflected movement toward achieving the permanency plan (87%), and met the child's needs (91%).

Only 78% of cases ensured that all parties had a copy of the visitation plan. In cases that did not require a visitation plan, 85% included documentation about the reason why no visitation plan was necessary. In the majority of cases reviewed, visitation occurred in accordance with the plan for parents/guardians (85%) and siblings (88%). Supervisors indicated that reasonable efforts to facilitate visitation were documented in almost all cases. Most workers made efforts to address lack of compliance with visitation plans.

Maintaining Positive Relationships

	N	%
Positive relationship between child and mother	197	68
Positive relationship between child and father	163	54
Positive relationship between child and foster/kin caregiver	189	95
Efforts to maintain supportive relationship with mother	174	94
Efforts to maintain supportive relationship with father	138	80
Efforts to maintain supportive relationship with foster/kin caregiver	199	97

LSR data suggests that, based on supervisory review of the case record, children in out-of-home care are more likely to have a positive relationship with their temporary caregiver than either their mother or father. Supervisors indicated that 95% of children have a positive relationship with their foster/kin caregiver, 68% of children have a positive relationship with their mother, and 54% of children have a positive relationship with their father.

Similarly, caseworkers are more likely to maintain a positive relationship with the temporary foster/kin caregiver than either the mother or father.

Supervisors indicated that 97% of workers made efforts to maintain a supportive relationship with temporary caregiver, 94% made efforts to maintain a supportive relationship with the child's mother, and 80% made efforts to maintain a supportive relationship with the child's father. Across the state, workers seem to be most consistent in promoting supportive relationships with temporary caregivers and least consistent in promoting supportive relationship with fathers.

Notification

Table 11. Notification	N	%
Parents/guardians were notified of the following activities in a timely manner:		
Court hearings	232	92
Periodic reviews	217	94
Changes in placement	156	90
Changes affecting visitation	143	92
Intent for TPR	124	94
Availability of legal services	177	96
Medical treatment	147	92
Service agreement and concurrent plan	207	92
Financial support of child	189	93
Right to revoke voluntary placement	10	100
LDSS must petition for custody > 180 days	10	100
Appointment for assessment meeting	16	94
Complete explanation of voluntary placement process	15	100
Time and date of interagency team meeting	22	100
Child's eligibility for services	15	100
Procedure to obtain placement resources	16	88
Obligation of LDSS to investigate child maltreatment	16	100
LDSS petitions the court after 180 days	15	100
Right to revoke voluntary placement agreement	15	100
Obligation to pay child support	21	91
Worker and family jointly develop case plan	100	80
Cannot agree to change permanency plan	69	81
The following parties were notified of reports of abuse in out-of-home care in a timely manner:		
SSA	32	81
Child's parents	36	89
Child's attorney	39	90
Caseworkers for other children	32	91
Other parties	27	89
Written notice of foster home approval sent to foster care provider	34	88
Written notice overpayment sent to foster care provider	11	91
Written notice of permanency review hearing sent to foster care provider	75	81

According to the Local Supervisory Review data, Maryland is providing appropriate and timely notification to parents and other relevant parties of important aspects of the child's placement. Parents were notified in 90-100% of cases in almost every item included in the Local Supervisory Review. These items include changes in placement and visitation, intent for TPR, parental rights and obligations, abuse reports in the foster home, and other important areas. A slightly smaller percentage of cases notified parents about procedures to obtain placement resources (88%), jointly developing a case plan (80%), and the inability to agree to change the permanency plan (81%).

When there was a report of abuse of a child in out-of-home care, SSA, the child's parents, the child's attorney, caseworkers for other children, and other parties were generally notified in a timely manner. Foster parents were provided written notification of foster home approval, notice of overpayment, and notice of an upcoming permanency review hearing.

Child Well-Being

The local supervisory review assesses child well-being outcomes with items in three categories. Well-Being Outcome 1 assesses the needs and involvement of child, parent, and care provider, as well as worker contacts. Well-Being Outcome 2 assesses the child's school enrollment and subsequent involvement. Well-Being Outcome 3 assesses the child's mental and physical health.

Well-Being 1: Families have enhanced capacity to care for their children's needs

Thirty items were assessed for Well-Being 1. These items and their results are presented in Tables 12 and 13, below.

Needs Assessment/Service Planning

	N	%
Ongoing assessment of needs of child, parents, and care provider	394	96
Service goals address needs	415	98
Services made available for child	439	97
Services made available for mother	345	95
Services made available for father	231	88
Services made available for caregiver	220	96
Child actively involved in service planning	344	85
Mother actively involved in service planning	340	87
Father actively involved in service planning	232	67
Caregiver actively involved in service planning	233	91
Service plan demonstrating work toward self-sufficiency	88	90
Activities and services aimed at long-term stability	93	96
Aftercare plan developed prior to exit from care	30	87

LSR data suggest that Maryland promoted child, family, and caregiver involvement in assessing needs and planning services. Findings indicate that the needs of child, parents, and caregivers are assessed on an ongoing basis for almost all cases. Services were made available to the child, mother, and caregiver in over 95% of cases statewide. Caregivers, mothers, and children were involved in service planning in over 85% of cases statewide. Supervisors indicated that the current service plan demonstrated work toward self-sufficiency in the majority of cases reviewed. These data indicated that activities and services aimed at long-term stability were present in nearly every case. Aftercare plans were generally developed before a child's exit from care.

There were noteworthy differences in father involvement in needs assessment and service planning. Compared to children, mothers, and caregivers, fathers are receiving fewer services and are substantially less involved in service planning.

Worker Visits

Table 13. Worker Visits	N	%
Child seen by in-home worker once every other week	247	83
Child seen by OOH worker within one week of placement	194	93
Child seen by OOH worker monthly after placement	252	91
Child seen at maltreatment report and once a week thereafter	42	76
Child seen once a week in aftercare	32	75
Child in instate RTC seen every 3 months, out of state RTC every 6 months	38	97
Evidence of worker contacts with mother	374	86
Evidence of worker contacts with father	249	75
Evidence of worker contacts with provider	275	95
Contact frequency meets needs of child	458	95
Contact frequency meets needs of mother	339	92
Contact frequency meets needs of father	226	81
Contact frequency meets needs of caregiver	244	95
Worker focused on pertinent issues when visiting child	459	93
Worker focused on pertinent issues when visiting mother	325	91
Worker focused on pertinent issues when visiting father	201	82
Worker focused on pertinent issues when visiting caregiver	274	95

Based on the LSR data, worker visits were generally making regular contacts that meet the needs of children and families. Children were seen by an in-home worker twice a month in 83% of cases. In most cases, children were seen by an out-of-home worker within a week of placement and monthly thereafter. The data suggest that only three-quarters of children were seen at maltreatment report (in out-of-home care) and once a week thereafter. Three quarters of children were seen by a worker once a week in aftercare. In almost every case, children in residential treatment centers were seen every 3 months instate, and every 6 months out of state.

Once again LSR findings suggest differential treatment for fathers compared to the child, mother, and current caregiver. Evidence of worker contacts was highest with the child and their provider (95%), followed by the mother (86%), and the father (75%). The frequency of contacts met the needs of the child and caregiver in 95% of cases, met the needs of the mother in 92% of cases, and met the needs of the father in 82% of cases. Workers were found to be focused on pertinent issues when visiting the child, mother, and caregiver in over 95% of cases. The focus on these issues was slightly less for fathers—in only 82% of cases.

Well-Being 2: Children receive appropriate services to meet their educational needs

Twelve items were assessed for Well-Being 2. These items are presented below in Table 14, along with their results.

School Enrollment/Performance

Table 14. School Enrollment/Performance	N	%
Child enrolled in school	306	96
Child enrolled in school within 5 days of placement	141	89
Jurisdictional issues prevented enrollment	19	58
School related delays prevented enrollment	20	70
Expulsion prevented enrollment	17	35
DOE timelines for school prevented enrollment	12	58
Agency error prevented enrollment	16	31
"Other" prevented enrollment	13	77
Re-enrolled within 5 days of placement change	55	91
School performance needs have been assessed	185	96
School performance needs have been addressed	190	94
Record documents the special needs of the child are being met	145	95

Findings from the LSR suggest that Maryland is addressing school enrollment and performance needs on a fairly consistent basis. Almost every case reviewed was enrolled in school. 89% of these children were enrolled in school within five days of placement. Reasons cited for delay of enrollment were jurisdictional issues (58%), school related delays (70%), expulsion (35%), DOE timelines for school (58%), agency error (31%), and "other" (77%). These issues preventing enrollment were highly variable across counties in Maryland. Most children were re-enrolled within five days of a placement change. Data indicate that school performance needs have been assessed, addressed, and documented in almost all cases.

Well-Being 3: Children receive services to meet their physical and mental health needs

Twenty-two items were used to assess child well-being 3. The findings from these items are presented in Tables 15 and 16, below.

Mental Health

Table 15. Mental Health	N	%
Mental health screening within 30 days of placement	151	83
Comprehensive mental health need screening within 60 days of OOH	115	83
Mental health needs treated appropriately	199	95
Parents or child involved in provision of mental health services	180	94
Consents for release of medical records procured timely	160	98
Consent for medication provided by LCSW or LCSW-C	100	90

Data from the Local Supervisory Review indicate that statewide, Maryland is doing fairly well in promoting mental health for children in care. The majority cases reviewed (83%) had a mental health screening within 30 days of placement, though this finding varied between jurisdictions. The same percentage of children (83%) received a comprehensive mental health need screening within 60 days of out-of-home placement.

Almost all children had their mental health needs treated appropriately. Parents and children were involved in the provision of mental health services in a very high percentage of cases (94%). Consents for the release of medical records were procured in a timely manner in nearly every applicable case in Maryland. The consent for medication provided by an LCSW or LCSW-C was high, though not consistent across the state.

Physical/Dental Health

Table 16. Physical/Dental Health	N	%
Child received preventative dental care	239	70
Child's dental needs were treated appropriately	202	80
Initial health screening within 5 days of placement	189	92
Services not available near placement	25	80
Lack of providers who accepted medical assistance	15	67
Child ran away	17	59
Agency error caused lack of health screening	21	76
Comprehensive health evaluation within 60 days of placement	177	91
Referral within 30 days in Baltimore City	16	81
Services not available near placement	19	47
Lack of providers who accepted medical assistance	15	40
Child ran away	17	47
Delay in making referral	19	53
Agency error caused lack of comprehensive health evaluation	26	4
Physical examination within last 12 months	200	87
Physical health needs have been treated appropriately	226	93

Findings from the LSR indicate that only 70% of children received preventative dental care; 80% of cases treated children's dental needs appropriately.

92% of children had a physical exam within the past 12 months; 93% of cases with physical health needs were treated appropriately. Most children received an initial health screening within five days of placement and a comprehensive health evaluation within 60 days of placement. Slightly fewer referrals were made within 30 days in Baltimore City. Frequent challenges in gaining health screenings were a lack of services available near placement, a lack of providers who accepted medical assistance, the child running away, and agency error.

Child Home Approval and Safety

The local supervisory review assesses home approval and safety outcomes to ensure that children are receiving adequate supervision in a secure environment. These items assess the ability of foster/adoptive parents to be competent caregivers while providing a safe home for children in their care. Findings for each of these items are discussed below.

Home Approval and Safety

Fifteen items were assessed for Home Approval and Safety. These items and their results are presented in Table 17, below.

Table 17. Home Approval and Safety	N	%
Home study completed and applicants notified within 120 days	20	80
Criminal history checks over age 18	38	92
Annual reconsideration to determine continued compliance	26	96
Foster/adoptive parents are culturally competent	32	91
Foster/adoptive parents are mature	31	94
Foster/adoptive parents are trained	32	97
Appropriate plans for alternative supervision	33	97
Documentation of the following items is included in the case file:		
Initial fire safety inspection	30	87
Annual fire safety inspection checklist	30	83
Initial health and sanitation inspection	30	83
Annual visual health/sanitation inspection	30	73
Written medical reports on all family members	31	77
Central abuse registry	33	79
Signed copy of the home approval certificate in resource home case file	29	83

According to the LSR, Maryland is doing well in ensuring that children are provided a safe home with competent caregivers. Criminal history checks over 18 were completed in nearly all cases (92%). Home studies were completed and applicants were notified within 120 days in 80% of cases. Annual reconsideration to determine continued compliance was performed in 96% of applicable cases.

A large majority of foster/adoptive parents are considered by supervisors to be culturally competent (91%), mature (94%), and trained (97%). Most children also had appropriate plans for alternative supervision (97%).

Findings suggest high rates of documentation in the areas of fire safety inspection and health and sanitation inspection, both at 83%. Slightly lower rates of documentation of annual visual health/sanitation inspection (73%), written medical reports on all family members (77%), and in the central abuse registry (79%) were found. Signed copies of the home approval certificate in the resource home case file were noted 83% of cases.

Appendix A: Local Supervisory Review Completion Rate

Table A1. LSR Completion Rate

Jurisdiction	Number of cases	Completion Rate
Allegany	36	100%
Anne Arundel	32	114%
Baltimore City	24	86%
Baltimore County	2	7%
Calvert	23	64%
Caroline	21	75%
Carroll	28	78%
Cecil	21	58%
Charles	31	86%
Dorchester	29	81%
Frederick	30	83%
Garrett	31	86%
Harford	27	96%
Howard	21	58%
Kent	36	100%
Montgomery	19	68%
Prince George's	28	78%
Queen Anne's	35	97%
Somerset	13	36%
St. Mary's	4	11%
Talbot	29	81%
Washington	39	108%
Wicomico	24	67%
Worcester	11	31%

NOTE: Included in the table above are the six pilot sites that were only required to submit cases through October 2007. The six pilot sites (Anne Arundel County, Baltimore City, Baltimore County, Caroline County, Harford County and Montgomery County) have a completion rate that is based on 28 cases equaling to 100%. The rest of counties' completion rate percentage is based on a total of 36 cases.

Appendix B: Regional Tables

Regional Breakdown

Eastern Shore: Kent, Talbot, Caroline, Dorchester, Wicomico, Worcester, Queen Anne’s, Somerset
Western Maryland: Garrett, Allegany, Washington Charles, St. Mary’s, Calvert, Anne Arundel
Metro Region: Frederick, prince George’s, Montgomery
Northern Region: Carroll, Baltimore Co., Howard, Cecil, Harford
Baltimore City: Baltimore City

Table B1. Investigations

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Face-to-face contact with victims	63	98	16	94	13	100	28	93	35	97	7	86
Documented attempts at contact with victim	17	94	5	80	13	100	13	100	9	100	3	100
Face-to-face contact with all children in house	59	93	15	73	13	92	19	79	33	91	4	100
Documented attempts at contact with all children	10	100	4	50	2	50	7	100	11	73	11	73

Table B2. Risk/Safety Assessment and Planning

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Adequate safety assessment	165	94	65	94	69	86	52	87	68	94	22	100
Adequate risk assessment	139	90	55	91	65	85	46	85	59	92	18	100
Safety plan	93	95	24	100	24	92	15	87	30	97	13	100
Evidence of efforts to reduce risk	95	98	36	100	40	100	23	100	41	98	9	100

Table B3. Services to Reduce Risk of Harm

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Services appropriate to needs/risk	125	98	54	100	50	100	33	97	53	100	12	100
Services available and accessible	127	98	52	100	50	100	31	100	53	100	11	100
Services tailored	121	99	50	100	46	100	32	97	53	100	11	100
Services use family resources	121	99	47	100	47	100	30	100	51	100	10	100
outcome of interventions and services	109	99	45	98	35	94	24	92	42	98	9	100

Table B4. Case Plan/Service Agreement

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Case plan and service agreement within 60 days	86	99	31	94	28	93	18	100	30	90	13	92
Case plan and service agreement updated with-in 6months entry	85	93	37	95	29	90	28	96	32	94	15	80
Case plan and service agreement updated every 6 months	81	93	29	93	29	86	20	90	37	81	14	71
Service agreement identify primary permanency goal	101	100	39	97	35	86	30	100	42	91	13	85
Service agreement identify secondary permanency goal	88	97	37	89	32	84	23	91	40	93	14	79
Service agreement consistent with permanency goals	94	100	38	97	30	90	32	100	39	92	16	88
Service agreement complete	98	91	37	73	35	80	30	93	40	83	13	85

Table B5. Placement and Permanency Planning

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Current placement meeting child's needs	94	99	40	98	35	100	33	94	44	100	17	94
Current placement is stable	92	96	37	97	36	94	31	94	43	100	15	100
Permanency goals in child's best interest	93	100	35	97	36	94	33	100	39	100	14	100
Best interest to continue current plan	65	94	24	92	26	96	22	96	31	90	8	100
Caregiver informed about child's history and permanency plan	91	98	37	100	34	100	29	100	42	98	13	100
Reasonable efforts toward primary permanency goal	97	100	40	100	38	97	33	100	45	96	17	100
Reasonable efforts toward secondary permanency goal	83	99	35	77	36	89	26	96	41	95	13	100
Permanency goal achieved within 12 months	61	43	24	25	25	56	19	42	29	45	10	50

Table B6. Termination of Parental Rights (TPR)

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
TPR filed	55	71	16	44	17	65	16	31	24	46	10	30
Case file documents compelling reason for not filing	19	100	11	64	7	100	15	93	15	80	9	56
TPR filed within 30 days of Court approval of change of plan to adoption	27	70	9	67	9	89	8	38	10	80	6	17
TPR filed within 60 days of decision to file petition	26	85	6	50	6	67	4	50	7	71	6	33
TPR decision rendered within 180 days	28	75	8	63	9	56	5	40	9	33	4	0
Delay due to issuance of show cause order	5	0	3	67	2	0	3	0	4	25	1	0
Delay due to scheduling of hearing	5	20	4	75	4	50	3	33	5	80	1	0
Delay due to postponement of hearing	7	57	2	0	3	67	4	25	5	20	2	50
Delay due to insufficient search for absent parent	5	0	2	0	2	0	3	0	4	0	2	50
Delay due to court requiring search beyond statute	5	0	2	0	2	0	3	0	4	0	2	50
Delay due to publication	5	0	2	0	2	50	3	0	4	0	1	0
Delay due to lack of prompt court decision	6	50	3	67	2	0	3	0	5	20	1	0
LDSS should have requested waiver of reunification services	67	10	25	0	30	0	22	5	31	3	9	22

Table B7. Adoption

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Evidence of life book	34	82	8	63	12	100	9	44	13	92	3	67
Child registered with MARE	7	86	1	0	4	100	2	0	3	67	1	100
Child registered with AdoptUsKids	8	38			4	50	2	0	3	67		
Signed copy of the social summary in child's record	16	75	6	67	12	75	4	25	8	25	3	33
Family receiving appropriate services	21	100	8	100	13	92	8	100	14	93	4	100

Table B8. Preservation of Primary Connections

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Placement in close proximity to parent/guardian	80	54	28	46	33	55	27	70	30	77	15	73
Reason for placement related to case goals	42	95	18	100	17	100	12	92	14	100	5	100
Siblings in same OOH placement	54	43	20	70	19	53	13	62	15	60	8	50
Reasonable efforts to place siblings together	29	100	6	100	9	100	4	75	15	93	4	50
Clinical or compelling reason for separation	33	94	8	88	9	100	6	67	15	87	4	75
Primary connections preserved in OOH	86	95	32	91	31	100	29	93	30	97	12	75
Consider maternal relatives as placement resource	89	99	29	93	32	100	28	100	33	100	12	100
Consider paternal relatives as placement resource	86	98	28	86	31	100	28	89	29	100	11	91

Table B9. Visitation

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Visitation plan supports relationship with parent/guardian	76	88	30	87	27	89	24	92	36	86	13	69
Visitation plan supports relationship with siblings	43	84	10	100	17	82	6	67	18	94	11	73
Visitation meets needs of children	83	92	31	94	28	89	24	88	38	92	8	75
Visitation reflects movement toward achieving permanency	71	93	25	76	24	88	19	100	30	73	9	89
All parties have a copy of visitation plan	71	87	27	74	27	74	17	88	35	71	11	36
Documentation for the absence of visitation plan	27	93	17	94	9	67	7	86	14	79	4	50
Visitation in accordance with plan for parents/guardians	68	84	28	93	27	93	21	81	35	83	9	67
Visitation in accordance with plan for siblings	36	92	14	93	17	88	5	80	15	93	8	63
Reasonable efforts to facilitate visitation	87	99	27	96	30	90	24	92	40	100	10	60
Efforts to address lack of compliance with visitation plan	45	87	19	84	14	79	10	80	27	93	7	71

Table B10. Maintaining Positive Relationships

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Positive relationship between child and mother	74	57	28	77	25	80	23	65	32	72	15	73
Positive relationship between child and father	57	42	24	67	24	58	23	48	24	67	11	64
Positive relationship between child and foster/kin caregiver	77	91	28	97	19	95	25	96	28	100	12	100
Efforts to maintain relationship with mother	60	95	29	93	23	96	19	95	29	100	14	79
Efforts to maintain relationship with father	40	80	23	78	22	86	20	70	22	91	11	64
Efforts to maintain relationship with foster/kin caregiver	78	99	26	92	20	100	26	92	34	100	15	87

Table B11. Notification

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Parents/guardians were notified of the following activities in a timely manner:												
Court hearings	84	95	40	100	32	91	28	79	36	97	12	67
Periodic reviews	79	98	34	100	32	91	25	92	33	97	14	57
Changes in placement	51	90	28	93	26	89	16	94	27	89	8	88
Changes affecting visitation	53	94	26	92	21	86	11	100	26	92	6	83
Intent for TPR	44	96	20	95	18	100	13	85	19	100	10	80
Availability of legal services	66	99	34	97	22	96	16	88	28	100	11	82
Medical treatment	51	92	25	96	21	95	17	88	22	96	11	73
Service agreement and concurrent plan	78	94	33	97	28	86	22	91	35	94	11	73
Financial support of child	66	91	32	100	26	92	19	90	34	97	12	75
Right to revoke voluntary placement	3	100	1	100	3	100	3	100	3	100	1	100
LDSS must petition for custody > 180 days	3	100	1	100	3	100	3	100	3	100		
Appointment for assessment meeting	8	88			4	100			3	100		
Complete explanation of voluntary placement process	8	100	4	100	4	100			3	100		
Time and date of interagency team meeting	13	100	5	100	5	100			3	100	1	100
Child's eligibility for services	8	100			4	100			3	100		
Procedure to obtain placement resources	7	86	1	0	5	100			3	100		
Obligation of LDSS to investigate child maltreatment	8	100	4	100	4	100	1	100	3	100		
LDSS petitions the court after 180 days	8	100			4	100			3	100		
Right to revoke voluntary placement agreement	8	100			4	100			3	100		
Obligation to pay child support	8	100	2	100	4	100	2	100	3	100	2	0
Worker and family jointly develop case plan	36	89	20	95	7	71	12	50	17	77	8	63
Cannot agree to change permanency plan	24	92	12	100	5	80	7	57	15	73	6	50
The following parties were notified of reports of abuse in out of home care in a timely manner:												
SSA	13	54	5	100	3	100			8	100	3	100
Child's parents	14	79	6	100	3	100	1	100	8	100	4	75
Child's attorney	17	77	6	100	3	100	1	100	8	100	4	100
Caseworkers for other children	12	83	5	100	3	100	1	100	8	100	3	100
Other parties	10	80	4	75	3	100			7	100	3	100

Table B11. Notification (cont.)

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Written notice of foster home approval sent to foster care provider	13	92	6	83	3	100	2	100	5	80	5	80
Written notice of overpayment foster care sent to foster care provider	1	100	5	80			4	100	1	100		
Written notice of permanency review hearing sent to foster care provider	28	89	13	92	7	86	10	60	13	77	4	50

Table B12. Needs Assessment/Service Planning

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Ongoing assessment of needs	134	99	62	95	70	89	40	100	70	97	18	100
Service goals address needs	150	99	63	97	72	93	42	98	68	100	20	95
Services available for child	156	99	66	100	74	93	47	100	75	100	21	100
Services available for mother	115	98	60	93	58	93	34	91	63	95	15	93
Services available for father	77	91	31	77	38	87	26	89	46	94	13	85
Services available for caregiver	81	96	26	89	32	88	30	100	37	100	14	93
Child involved in service planning	117	87	58	90	69	74	28	96	57	84	15	73
Mother involved in service planning	113	88	61	90	60	83	32	91	60	90	14	64
Father involved in service planning	79	63	36	69	39	67	23	70	45	78	10	30
Caregiver involved in service planning	86	94	31	87	36	81	31	94	36	100	13	77
Service plan demonstrating work toward self-sufficiency	29	86	7	100	15	93	11	100	21	86	5	80
Activities and services aimed at long-term stability	30	93	8	100	17	100	14	93	19	100	5	80
Aftercare plan prior to exit	8	88	3	100	5	60	1	0	11	100	2	100

Table B13. Worker Visits

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Child seen by in-home worker once every other week	80	89	43	88	45	62	20	70	44	93	15	87
Child seen by OOH worker within one week of placement	81	94	27	89	23	96	22	87	30	97	11	91
Child seen by OOH worker monthly after placement	91	95	36	92	36	94	28	93	45	80	16	81
Child seen at maltreatment report and once a week thereafter	16	69	8	100	1	0	4	75	8	100	5	40
Child seen once a week in aftercare	6	83	7	86	2	50	3	33	12	92	2	0
Child in instate RTC seen every 3 months, out of state RTC every 6 months	16	100	4	100	5	100	2	100	9	100	2	50
Required contacts with mother	130	94	65	85	58	86	37	68	66	89	18	56
Required contacts with father	89	76	35	74	44	84	24	54	46	85	11	27
Required contacts with provider	100	96	43	100	41	95	33	100	44	87	14	86
Contact frequency meets needs of child	161	96	75	97	74	92	49	92	77	97	22	96
Contact frequency meets needs of mother	112	95	60	93	58	93	29	79	63	94	17	65
Contact frequency meets needs of father	73	80	37	84	38	95	21	67	47	87	10	30
Contact frequency meets needs of caregiver	89	97	34	100	33	94	30	100	44	86	14	93
Worker focused on pertinent issues when visiting child	164	98	74	88	76	88	46	96	77	94	22	91
Worker focused on pertinent issues when visiting mother	109	96	60	88	56	89	26	81	61	93	13	62
Worker focused on pertinent issues when visiting father	71	83	31	77	34	88	18	72	40	90	7	27
Worker focused on pertinent issues when visiting caregiver	99	99	39	87	47	94	33	100	41	90	15	93

Table B14. School Enrollment/ Performance

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Child enrolled in school	108	94	45	100	57	97	35	94	45	98	16	94
Child enrolled in school within 5 days of placement	57	84	24	92	14	100	15	87	21	91	10	100
Jurisdictional issues prevented enrollment	9	67	2	100			2	50	2	50	4	25
School related delays prevented enrollment	11	73	2	100	1	100	1	100	1	100	4	25
Expulsion prevented enrollment	7	0	4	75			1	100	1	100	4	25
DOE timelines for school prevented enrollment	7	71	1	100					1	100	3	0
Agency error prevented enrollment	8	13	3	67					2	100	3	0
"Other" prevented enrollment	5	100	1	100			2	100	2	100	3	0
re-enrolled after placement change	21	95	5	100	6	100	5	60	14	93	4	75
School performance needs have been assessed	70	94	24	100	32	97	19	100	33	91	7	100
School performance needs have been addressed	74	91	23	100	32	94	23	100	33	94	5	100
Record documents the special needs of the child	50	92	18	94	26	100	20	95	25	96	6	100

Table B15. Mental Health

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Mental health screening within 30 days of placement	57	77	21	81	23	91	15	87	25	84	10	90
Comprehensive mental health need within 60 days of OOH	41	83	22	73	19	90	11	100	17	82	5	60
Mental health needs treated appropriately	73	99	28	93	38	92	18	90	34	97	8	88
Parents or child involved in provision of mental health services	69	94	24	88	35	97	17	94	27	100	8	75
Consents for release of medical records procured timely	64	97	24	92	25	100	14	100	28	100	5	100
Consent for medication provided by LCSW or LCSW-C	42	86	10	80	16	100	8	100	20	90	4	100

Table B16. Physical/Dental Health

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Child received preventative dental care	86	66	35	69	40	73	26	73	39	77	13	69
Child's dental needs were treated appropriately	71	75	31	87	29	90	23	78	36	81	12	75
Initial health screening within 5 days of placement	81	95	28	93	23	91	18	83	25	92	14	86
Services not available near placement	8	75	4	100	3	33	3	100	7	86		
Lack of providers who accepted medical assistance	5	60	2	100	2	0	1	0	2	100		
Child ran away	5	40	4	100	2	0	1	0	5	80		
Agency error	3	0	3	100	6	67	4	100	5	100		
Comprehensive health evaluation within 60 days of placement	79	91	25	100	22	86	18	72	24	96	9	100
Referral within 30 days in Baltimore City			3	100	1	0	2	100	5	100	5	60
Services not available near placement	4	50	3	100	3	0	2	0	5	80	2	0
Lack of providers who accepted medical assistance	3	0	2	100	3	0	1	0	5	80	1	0
Child ran away	4	25	2	100	3	0	2	50	5	80	1	0
Delay in making referral	6	33	3	100	2	0	2	50	5	80	1	0
Agency error	7	0	5	0	3	0	4	0	5	20	2	0
Physical examination within last 12 months	70	80	30	93	37	92	19	80	32	97	12	75
Physical health needs have been treated appropriately	77	91	25	60	40	98	28	89	40	93	16	88

Table B17. Home Approval and Safety

	Eastern Shore		Western Maryland		Southern Maryland		Metro Region		Northern Region		Baltimore City	
	N	%	N	%	N	%	N	%	N	%	N	%
Home study completed and applicants notified within 120 days	6	83	5	100	2	50	3	100	3	67	1	0
Criminal history checks over age 18	9	100	5	100	2	100	12	75	3	100	7	100
Annual reconsideration to determine continued compliance	8	100	4	100			6	100	1	100	7	86
Foster/adoptive parents have cultural competence	11	100	5	100	1	100	6	100	2	100	7	57
Foster/adoptive parents have maturity	11	100	5	100	1	100	6	100	2	100	6	67
Foster/adoptive parents have training	11	100	5	100			8	100	3	100	5	80
Appropriate plans for alternative supervision	10	100	5	100	1	100	7	100	3	100	7	86
Documentation about initial fire safety	10	100	4	100			10	70	2	50	4	100
Documentation about annual fire safety checklist	11	100	4	100			10	60	1	0	4	100
Documentation about initial health and sanitation inspection	10	90	3	100			10	70	2	50	5	100
Documentation about annual visual health and sanitation inspection	11	91	4	100			9	67	1	0	5	40
Documentation in the written medical reports on family members	11	91	4	100			10	70	2	50	4	50
Documentation in the central abuse registry	11	100	4	100	1	100	10	70	2	50	5	40
Signed copy of the home approval certificate	12	83	4	100			8	88	1	100	4	50