

# **Citizens Review Board For Children**



**ANNUAL REPORT**

**FISCAL 2024**

**(July 1<sup>st</sup> 2023 - June 30<sup>th</sup> 2024)**

## Table of Contents

<b>Introduction .....</b>	<b>3</b>
<b>By the CRBC State Board Chair FY2024 .....</b>	<b>3</b>
.....	
<b>Executive Summary .....</b>	<b>4</b>
<b>Child Welfare Barriers.....</b>	<b>8</b>
<b>Recommendations to DHS for FY2024 .....</b>	<b>8</b>
<b>Acknowledgements .....</b>	<b>10</b>
<b>SSA Response to CRBC's FY2024 Annual Report.....</b>	<b>11</b>
<b>From SSA Executive Director .....</b>	<b>11</b>
.....	
<b>CRBC Program Description.....</b>	<b>14</b>
<b>Mission .....</b>	<b>15</b>
<b>Vision .....</b>	<b>15</b>
<b>Goals .....</b>	<b>15</b>
<b>Discrimination.....</b>	<b>15</b>
<b>Confidentiality .....</b>	<b>15</b>
.....	
<b>CRBC Appointments and FY2024 Activities .....</b>	<b>16</b>
<b>FY2024 New Appointments.....</b>	<b>16</b>
<b>Educational Advocacy.....</b>	<b>17</b>
<b>Training.....</b>	<b>18</b>
<b>Promoting Safety, Well-Being and Permanency.....</b>	<b>19</b>
<b>Meetings and Advocacy.....</b>	<b>19</b>
<b>FY2024 Legislative Activities.....</b>	<b>21</b>
.....	
<b>FY2024 Out-of-Home Placement Case Reviews .....</b>	<b>25</b>
<b>Targeted Review Criteria.....</b>	<b>25</b>
<b>Case Review Findings by Permanency Plans and Jurisdiction.....</b>	<b>26</b>
<b>Gender Totals.....</b>	<b>26</b>
<b>Ethnicity Overall .....</b>	<b>27</b>
<b>Age Range by Permanency Plan .....</b>	<b>27</b>
.....	
<b>FY2024 Case Reviews by Jurisdiction/Permanency Plan.....</b>	<b>28</b>
<b>Health and Education.....</b>	<b>29</b>
<b>Reunification.....</b>	<b>31</b>
<b>Non-Relative Adoption .....</b>	<b>33</b>
<b>APPLA.....</b>	<b>35</b>
<b>Relative Placement for Adoption .....</b>	<b>38</b>
<b>Non-Relative Custody and Guardianship.....</b>	<b>40</b>
<b>Relative Placement for Custody and Guardianship.....</b>	<b>42</b>
.....	
<b>FY2024 CRBC State Board .....</b>	<b>44</b>
<b>FY2024 CRBC Volunteer Board Members.....</b>	<b>45</b>
<b>CRBC Staff Members .....</b>	<b>46</b>
<b>References .....</b>	<b>47</b>

## **Introduction**

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

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

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

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

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

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

This CRBC FY2024 Annual Report contains CRBC's findings from our case reviews, advocacy efforts and recommendations for systemic improvements.

On behalf of the State Board of the Maryland Citizens Review Board for Children (CRBC), its staff and citizen volunteer board members, I present our Fiscal 2024 Annual Report.

Sincerely,

Nettie Anderson-Burrs  
State Board Chair

## **Executive Summary**

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

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

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

During fiscal year 2024, the Citizens Review Board for Children reviewed 693 cases of children and youth in Out-of-Home Placements. Reviews are conducted per a work plan developed in coordination with DHS and SSA with targeted review criteria based on Out-of-Home Placement permanency plans. This report includes Out-of-Home Placement review findings for health, education and older youth, CRBC activities including legislative advocacy and recommendations for system improvement for fiscal FY2024.

### **Health and Education Findings for statewide reviews include:**

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

treatment recommendations, health and mental health follow-up appointments and referrals recommended by medical providers.

- Approximately 293 (42%) of the children/youths were prescribed medication.
- Approximately 240 (35%) of the children/youths were prescribed psychotropic medication.
- The local boards found that there were completed medical records for 288 (42%) of the total cases reviewed.
- The local boards found that for 320 (46%) of the 693 total cases reviewed, the health needs of the children/youth had been met.
- 245 (53%) out of the 465 youths enrolled in school had a 504 or IEP plan.
- 70 (31%) out of 229 youth that were disabled and exiting school were aware of and engaged with community supports.
- The local boards agreed that 413 (60%) of the children/youth were being appropriately prepared to meet educational goals.

Demographic findings for statewide reviews include:

- 438 (63%) of the children/youth were African American.
- 211 (30%) of the children/youth were Caucasian.
- 338 (49%) of the children/youth were Male.
- 355 (51%) of the children/youth were Female.

CRBC conducted 224 Reunification reviews. Findings include:

- 63 cases (28%) had a plan of reunification for 3 or more years.
- The local boards agreed with the placement plan for 146 (65%) of the cases reviewed.
- The local boards found that service agreements were signed for 70 (31%) of the eligible cases reviewed. Two of the cases were post termination of parental rights and the child was under 14.
- The local boards agreed that the signed service agreements were appropriate to meet the needs of 67 (96%) of the 70 the children/youths.

CRBC conducted 141 Adoption reviews. Findings include:

- 11 (9%) of the 118 non-relative placements for adoption cases had a plan of adoption for 3 or more years.
- The local boards agreed with the placement plan for 117 (98%) of the 119 cases reviewed
- None (0%) of the 23 relative placement for adoption cases had a plan of adoption for 3 or more years.
- The local boards agreed with the placement plan for 23 (100%) of the 23 cases reviewed

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

- Pre-Adoptive resources not identified
- Child in pre-adoptive home, but adoption not finalized
- Efforts not made to move towards finalization

- Child does not consent
- Appeal by birth parents
- Other court-related barrier

### CRBC conducted 244 (APPLA) reviews - Another Planned Permanent Living Arrangement

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

- 109 (45%) of the cases had a plan of APPLA for 3 or more years.
- The local boards agreed with the permanency plan of APPLA for 244 (100%) of the 244 cases statewide. 236 of the cases reviewed with a permanency plan of APPLA were youth between the ages of 17-20.
- A permanent connection is an identified person that a youth can rely on for assistance with support, advice and guidance as they deal with the day-to-day life circumstances that adulthood can bring about on a regular basis. The local boards agreed that for 220 (90%) of the 244 cases of youth with a permanency planning goal of APPLA that a permanent connection had been identified, and the local boards agreed that the identified permanent connections were appropriate for 244 (100%) of the 244 cases.

### Barriers/Issues

Typical barriers to permanency/issues:

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

### Ready By 21 (Transitioning Youth)

Age of Youth (14 years and older all permanency plans = 411 cases)

- 121 (30%) of the 411 youths reviewed were between 14-16 years old.
- 178 (43%) of the 411 youths reviewed were between 17-19 years old.
- 112 (27%) of the 411 youths reviewed were 20 years old.

### Independent Living skills

- The local boards agreed that 228 (56%) of the eligible youths were receiving appropriate services to prepare for independent living.

### Employment

- The local boards found that 161 (39%) of the eligible youths were employed or participating in paid or unpaid work experience.
- The local boards agreed that 182 (44%) of the eligible youths were being appropriately prepared to meet employment goals.

### Housing (105 cases)

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

- The local boards found that 86 (82%) of the 105 youths had a housing plan specified.
- The local boards agreed that 83 (79%) youths were being appropriately prepared for transitioning out of care, 20 were not being appropriately prepared, 4 were not transitioning.

### Concurrent Planning

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

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

the number of placements in foster care and maintaining continuity of relationships with family, friends and community resources for children in out-of-home care.

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

The local boards found the following in statewide reviews:

- A total of 153 (77%) of the 325 eligible cases had a concurrent permanency plan identified by the Local Juvenile Courts.
- The Local Departments (LDSS) were implementing the concurrent permanency plans identified by the Local Juvenile Courts for 126 (41%) of the 310 cases.
- The local boards found that, for 208 (30%) of the eligible cases, the Local Departments (LDSS) were engaged in concurrent planning.

### **Child Welfare Barriers**

There has been an increasing number of children and youth without a placement option due to challenging behaviors. In some instances, children and youth with challenging behaviors have remained in hospitals or emergency rooms for extended periods of time due to a lack of placement or while waiting for placement. As a result, children and youth are deprived of services that they have a right to, including education, recreation and socialization. In other instances, when these stays or over-stays are not deemed medically necessary. Children and youth are put at further risk for anxiety, depression, and possibly harm due to this trauma. On March 4, 2024, according to the Civil Rights Division, the Department of Justice filed a statement of interest explaining how the integration mandate of Title II of the American Disabilities Act applies to children who have been medically cleared for discharge from psychiatric institutions but who remain institutionalized because of the lack of available community placements. A lawsuit was filed, T.G. v. Maryland Department of Human Services on behalf of children in the foster care system with mental health disabilities that have been cleared for discharge but cannot go due the lack of resources. It is further noted that the Administrators of both the Department of Human Services and the Maryland Department of Health have failed to reasonably modify the programs to prevent prolonged overstay in segregated facilities. A lawsuit filed in May 2023 illustrates prolonged stays for children in the foster care system as well.

### **CRBC Recommendations to the Department of Human Services**

1. Review and develop policies and practices to ensure that all policies and practices are trauma informed.
2. Ensure consistency in the availability and delivery of services to children and youth involved with child welfare statewide by identifying resource needs and gaps to address lack of access.



3. Develop a system to track and monitor health including mental health of children and youth in out-of-home placement for improved oversight.
4. Coordinate services across Public Agencies, such as Primary Care, Behavioral Health, Medicaid, Juvenile Criminal Systems, Education, and Public Assistance to improve health needs being met and outcomes for children in Out-of-Home Placement.
5. Ensure adequate state resources to provide services to children and youth with intensive needs. Children with serious behavioral, emotional, and medical needs that require additional structure not provided in family or other group settings in-state, should receive appropriate services and level of support for their own safety and the safety of others and to help improve outcomes.
6. With Rate Reform anticipating to begin in 2025, there is an expectation that there will be an increase in additional resources for children in foster care, and as a consequence, these resources should be monitored.
7. Identify gaps and areas needing improvement in the child welfare workforce. Increase efforts to improve workforce development to attain and maintain a highly experienced and skilled workforce to include transfer of knowledge. Develop and implement measures to retain child welfare staff by considering case and workloads, staff development and training, quality of supervision and competitive compensation.
8. Ensure that concurrent planning occurs to increase the likelihood of establishing appropriate permanency plans or goals and achieve permanency without undue delay.
9. Explore other permanency options at least every 6 months for children and youth with a permanency plan of APPLA.
10. Continue to increase the number of relative/kin placement and permanency resources.
11. Explore adoption counseling for children and youth that have not consented to adoption.
12. Increase efforts to begin transitional planning should begin for youth at 14 to include housing, education, employment, and mentoring. Plans should be developed by the youth with the assistance of the Department of Social Services worker and others identified by the youth for support. Engagement of the youth and individuals identified by the youth is important. The plan should build on the youth's strengths and support their needs. While it is important to understand and meet legislative requirements for youth transitional plans, it is crucial that child welfare professionals working with youth view transitional planning as a process that unfolds over time and through close youth engagement rather than as a checklist of items to accomplish. <sup>1</sup>
13. Ensure that youth 14 and older begin to prepare for self-sufficiency by providing resources and opportunities for consistent independent living skills for youth statewide.

---

<sup>1</sup>Child Welfare Information Gateway <https://www.childwelfare.gov>

14. Identify housing resources and funding to address the lack of affordable housing options available for aging out youth.
15. Explore more opportunities to utilize the Family Unification Housing Program (FUP) and educate staff on how to access it.
16. Ensure that a specific housing plan is identified for older youth transitioning out of care at least 6 months prior to the anticipated date of discharge or youth's 21st birthday.
17. Increase community partnerships in order to further develop life/independent skills, gain employment experiences, and improve affordable housing options for older youth exiting care.

### **Acknowledgements**

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

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

April 8, 2024

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

Dear Ms. Anderson-Burrs and Review Board Members:

The Department of Human Services, Social Services Administration (DHS/SSA) extends its appreciation for the work of the Citizens Review Board for Children (CRBC). The CRBC Fiscal 2023 Annual Report provides information that is essential for DHS/SSA to continually improve its services to Maryland's children, youth and families who are involved with the child welfare system. The constructive feedback contained in the report contributes a great deal to our Continuous Quality Improvement (CQI) efforts.

DHS/SSA envisions a Maryland where all children are safe from abuse and neglect, children have permanent homes, and families are able to thrive. Maryland's 24 local departments of social services employ strategies to prevent child abuse and neglect, protect children, and preserve and strengthen families by collaborating with state and community partners. Maryland is building a system that improves family and child well-being with family-centered, child-focused, community-based services.

We are guided in this work by the Moore-Miller Administration values and a commitment to leave no one behind. DHS/SSA is prioritizing the following areas that address areas outlined in the CRBC recommendations.

1. Implementing the Family First Prevention Services Act (FFPSA);
2. Ending aging out from foster care;
3. Creating a kin-first culture; and
4. Reforming how we compensate providers who care for Maryland's children and youth.

DHS/SSA recognizes the need for critical services to meet the complex and individual needs of the families, children, and youth we serve. We continue to strengthen partnerships with key service providers, stakeholders, sister state agencies, and community partners to better coordinate services, communicate the needs of children and families, and raise awareness of needed services. The Department continues to implement prevention focused evidence-based practices (EBPs) across Maryland. The Family First Prevention Services Act makes it possible to offer Healthy Families America, Parent Child Interaction Therapy, Multisystemic Therapy, and Functional Family Therapy in Maryland to build the continuum of services for children and families to prevent entry into foster care.

In addition, DHS/SSA recognizes the importance of developing consistent and trauma-responsive services for Maryland's children, youth, and families. Maryland implemented its Integrated Practice Model (IPM) in 2020 and has continued to provide services as outlined in the model. The Department plans to revise the IPM to ensure that services continue to be family-centered strength-based, trauma responsive, outcomes driven, community-focused and culturally and linguistically responsive. The IPM highlights the need for an engaged, and well-prepared workforce and aligns with the CRBC's recommendations. While the Department has experienced increased difficulty in recruiting and

retaining qualified staff. Efforts have been taken to increase hiring of child welfare caseworkers, DHS has worked with the Department of Budget and Management to increase base hiring. In addition, to retain staff, all staff in child welfare caseworker classifications that were below the new base step had their compensation increased. The Department continues to focus its efforts on some key training such as Coach Approach, Coach Mentor Certification and Adaptive Leadership to assist with staff retention.

The CRBC report recommends that the Department develop a system to track and monitor health including mental health of children and youth in out-of-home placement for improved oversight. Under the leadership of the Child Welfare Medical Director and Nurse, the Department continues its work with the Chesapeake Regional Information System for our Patients (CRISP). The agreement allows the DHS Medical Director to access CRISP data to identify the health and wellness needs of children in the Department's care.

DHS continues to partner with our sister agencies as well as consultants to modernize our care provider rate framework to create a continuum of care that better meets the needs of Maryland's children and families. Many youth that do enter out-of-home placement often come to us with behavioral health and developmental needs. With a corresponding national decline in group-based placements, we must be ever more vigilant to ensure youth receive treatment services in Maryland. With rate reform, children and families will experience a streamlined placement process, higher quality and tailored services, and shorter lengths of stay. The initial phase of rate reform will be implemented in fiscal year 2025.

In support of creating lasting permanency for children and youth in care, DHS/SSA is focusing on creating a kin- first culture and increasing permanency outcomes for youth. Best practice and research remind Maryland that placement with kin increases stability, results in better mental and physical health outcomes, reduces the risk that youth in foster care will be trafficked, and keeps children connected to family, community, and culture. We have identified statutory, regulatory and policy changes necessary to enable Maryland to adopt kin-specific licensing which will increase permanency outcomes for youth. Additionally, DHS/SSA has contracts to provide adoption counseling and pre-and post- adoption support services to children, youth, and families. Regarding adoption counseling for youth who did not consent to adoption, DHS/SSA plans to explore the services offered to youth and what, if any additional pre-adoption supports are needed. The Department remains committed to working diligently to address barriers to permanency for Maryland's children.

The CRBC recommendations around older youth transition planning, including planning for housing and other independent living skills are being explored. The Department is embarking on older youth work with the Annie E. Casey Foundation, now known as *Advancing Well-Being and Connections for Youth in Foster Care*. The Department is invested in developing strategies that promote lifelong well-being for youth and young adults in Maryland's foster care system. With these efforts we will work to end "aging out" of foster care in Maryland.

In addition to the DHS/SSA Placement and Permanency Team continues to provide support and guidance on goals of ensuring children, youth and vulnerable adults are:

- Safe and free from maltreatment;
- Living with safe, supportive, and stable families and in least restrictive environments where they can grow and thrive;
- Able to achieve timely and lasting permanency; and

- Connected with professionals, family members, and other supportive resources to enable them to sustain success upon exiting our child welfare system.

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

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

The Department appreciates the recommendations to improve our practices. We are committed to continuing to identify and strategically implement best practices to effectively serve children, youth, families, and the vulnerable adults of Maryland. We look forward to the ongoing partnership with the CRBC.

Sincerely,



Dr. Alger Studstill, Jr.  
Executive Director  
Social Services Administration  
Maryland Department of Human Services

## **CRBC Program Description**

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

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

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

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

The Citizens Review Board for Children consists of Governor appointed volunteers from state and local boards. Currently, there are 35 local review boards representing all 24 jurisdictions (23 counties and Baltimore City). There are currently 144 volunteers serving on local boards, 2 pending appointments by the Governor, 1 applicant pending submission for appointment and 1 pending selection. CRBC reviews cases of children in Out-of-Home Placement, monitors child welfare programs and makes recommendations for system improvements.

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

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

## **Mission Statement**

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

## **Vision Statement**

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

## **Goals**

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

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

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

## **Discrimination Statement**

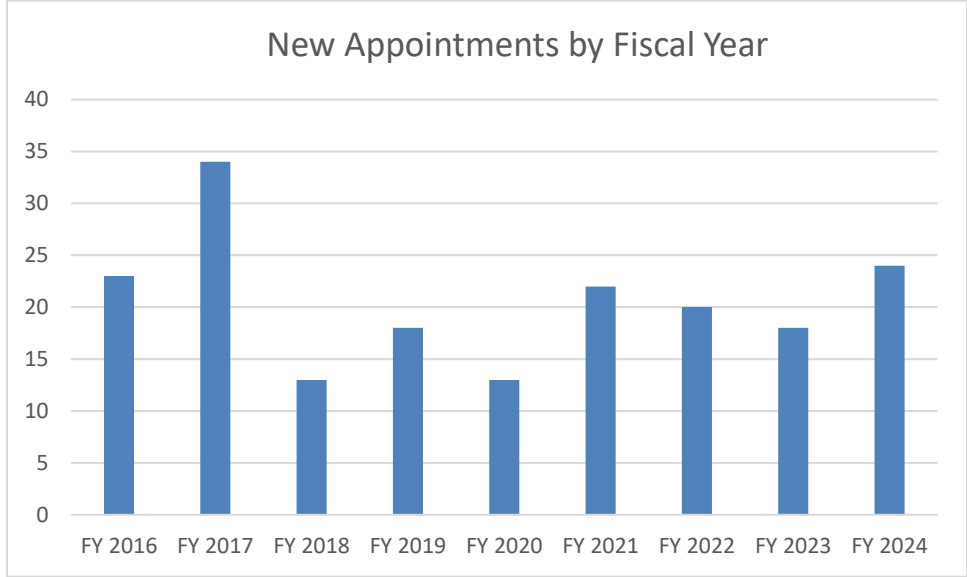
The Citizens Review Board for Children (CRBC) renounces any policy or practice of discrimination on the basis of race, gender, national origin, ethnicity, religion, disability, or sexual orientation that is or would be applicable to its citizen reviewers or staff or to the children, families, and employees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

## **Confidentiality**

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

# **CRBC Appointments and FY2024 Activities**

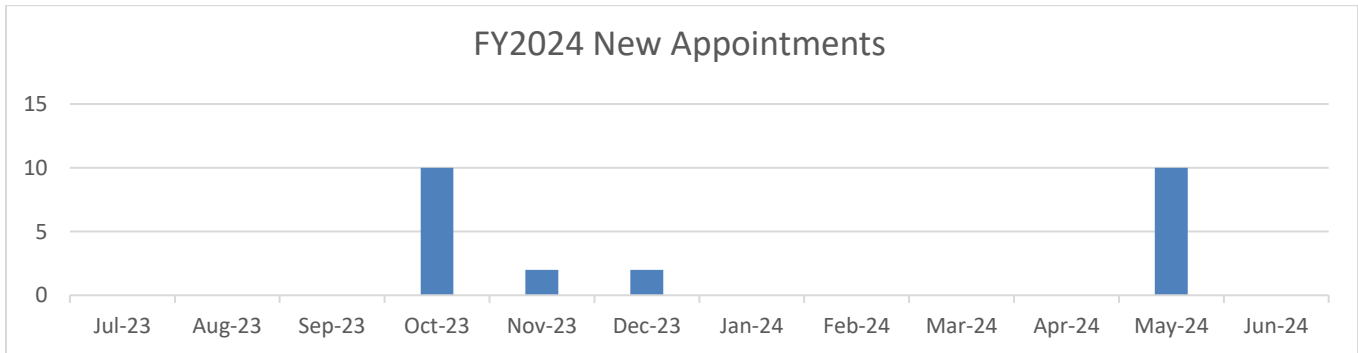
## **Appointments breakdown By Fiscal Year**



There were 23 new members appointed by the Governor to Local Out of Home Placement Review Boards in fiscal year 2016. Thirty-four members were appointed in fiscal year 2017, 13 were appointed in fiscal year 2018, 18 were appointed in fiscal year 2019, 13 were appointed in fiscal year 2020, 22 were appointed in fiscal year 2021 and 20 in 2022. In FY2023, 18 members were appointed.

## **FY2024 New Appointments**

During FY2024, CRBC continued to utilize recruitment and retention strategies to ensure membership and facilitation of reviews in all 23 counties and Baltimore City. Many of CRBC members have been dedicated and committed to serving on behalf of Maryland’s most vulnerable children and youth for numerous years. Ongoing recruitment is necessary to account for some expected reduction due to attrition. Recruitment efforts continued to support CRBC’s mission, vision and goals. The chart below shows appointments in FY2024.





In FY2024, 24 members were selected by selection committees and appointed by the Governor to local out-of-home placement review boards in jurisdictions where they reside. Members were appointed to the following local boards: Anne Arundel County (1), Allegany County (1), Baltimore County #1 (1), Baltimore County #3 (1), Baltimore County #4 (1), Calvert County (4), Cecil County (1), Frederick County (3), Howard County (1), Montgomery County #1 (1), Montgomery County #2 (1), Montgomery County #5 (1), Queen Anne's County (2), Wicomico County (1), Baltimore City SW#3 (1), Baltimore City NW#6 (2), and Baltimore City NW#8 (1). CRBC provided orientation, pre-service training and ongoing training, child welfare expertise and guidance for newly appointed members who served in FY2024.

### **Educational Advocacy**

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

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

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

The committee engaged in information gathering and a series of meetings with individuals with expertise in education and education advocacy. As the result of the above-mentioned meetings, it was determined that the committee would create a special education process tip sheet in an effort to assist the Departments with a clearer understanding of the process. Although it is in draft form and requires final approval, it is the intent to finalize it and begin to utilize it in the next fiscal year.

## **Training**

Due to the new guidelines and federal regulations, it was determined that it would be beneficial to provide training to board members and local departments statewide. There were two sessions held on March 20, 2024, and March 22, 2024, for a total of 110 participants combined for both sessions. The training was entitled "Equipping Older Foster Youth for College Readiness: Understanding Recent Free Application for Federal Student Aid (FAFSA)", presented by Christle Foster, MSM Executive Director of Trio Programs at Maryland Regional Community College. The learning objectives for the training was to gain an overview of the financial aid types Federal, State, and Private, along with a full understanding of FAFSA key changes and new technology and gain knowledge on how to assist students with new FAFSA process and how to navigate provisional independent status; understand how to assist students applying to the Maryland Higher Education Commissions' (MHEC) grant scholarship and waiver programs utilizing the MHEC One App through the Maryland College Aid Processing System (MDCAPS) Program.

One of CRBC's main goals is to support and advocate for children/youth in out of home care, but also provides support to the staff of the local departments. During a review, it was noted that three of the four youth were undocumented and unaccompanied, and it was unclear as to what should be the best course of action to address their needs. As a result, meetings were held with Alejandra Morisi, Managing Director for Kids in Need of Defense (KIND) and Diana Pak Yi, Senior Attorney for KIND to discuss how to proceed. As a result, "Introduction to Children's Immigration Matters" was developed. With that in mind, four training sessions were held, May 10<sup>th</sup> & May 17<sup>th</sup> morning sessions, October 2<sup>nd</sup> & October 8<sup>th</sup> evening sessions to accommodate the varied schedules of local department staff, partners and board members. The combined sessions for May had a total of 130 attendees and the sessions in October had a total of 109 attendees. The learning objectives for the sessions were to allow participants to identify key departments and agencies involved in the adjudication of immigration matters. Next, be able to define and recognize differences in the immigration status of children in Maryland State care. In addition, participants will be able to define and understand eligibility for common forms of immigration relief for immigrant youth in Maryland. Furthermore, be able to understand and apply cultural responsiveness when working with immigrant youth in Maryland. And finally, participants will be able to recognize and seek ways to help youth to be eligible for other services.

On April 19, 2024, CRBC provided an In-Service training and Volunteer Appreciation for all CRBC members entitled "Recognizing Mental Illness, Addressing Stigma, and Prioritizing Mental Health", presented by Amanda Hopkins, LCSW-C, a licensed therapist serving Maryland, Washington, DC and Virginia. The learning objectives of the training was to be able to differentiate similarities and differences between mental health and mental illness. In addition, can define trauma, it's symptoms and how childhood trauma may manifest itself into mental illness. Next, participants will have the ability to define stigma in mental illness that plagues communities for people of color. And finally, can differentiate between behaviors and mental illness in children in out of home placements.

## **Promoting Safety, Well-Being and Permanency**

CRBC's priorities remains the safety and well-being of Maryland's most vulnerable children and youth. In FY2024, CRBC facilitated virtual meetings with local department of social services administrators in Baltimore City, Baltimore County, Kent County, Prince George's County and Worcester County for individual and jurisdictional advocacy. CRBC advocated for resources and support for children and youth, child welfare staff, caregivers and providers. Further discussions elaborated on the lack of shared health and education information and documentation, the potential impact on case management, planning, decision making, placement stability and permanency. Advocacy efforts included safety, well-being, placement resources for youth with intensive needs, child welfare workforce, DHS policy and practices in addition to vacant child welfare positions and workforce development.

### **Meetings and Advocacy**

CRBC has consistently worked to enhance service delivery for children/youth in care by participating in various meetings and advocacy opportunities to be well informed. On **2/26/24** CRBC participated in the Advancing Well-Being & Connections for Youth in Foster Care Statewide Convening in Annapolis. The main purpose of the session was to review the data relating to the Youth in Foster Care in the State of Maryland as well as nationwide to determine what is the data saying about youth aging out of care. What kind of youth engagement is taking place prior to them aging out of care and are they really prepared. Other discussions were had about exploring the possibility of changing the aging out age to 23-25. No headway on the possibility, but just a point of contention. Creating more pathways to success with employment, housing support, mental health resources as well as educational opportunities.

On **3/19/24** a meeting was held with the ***Baltimore City Department of Social Services*** (BCDSS). In short, the Department discussed how they have moved forward with the KinFirst Agency philosophy and how they are improving the number of children placed with kin. In addition, they have asked for waivers for certain things to get kids placed sooner to include reviewing regulations with placements for instance, room spacing can be a huge hindrance when placing children. The Department was also focusing on increasing the number of children in care placed with kin as well as increasing the number of Kin families that are licensed. Board payment from the time of placement and working on streamlining the process starting on the provisional licensing for new entrants. The Department of Human Services (DHS) is working on the tracts for licensing from the FEDS that will allow some more leniency as it relates to placing children with kin.

BCDSS had a total of 1,476 children in care effective on the day of the meeting. Currently, they have 35% placed with kin and their goal is to have 50% of the children in care placed with kin. The Department has developed a Kin Center that is available to the entire community and not just persons with children in Foster Care providing resources and connecting families with needed support. BCDSS has made an effort to be innovative and creative by reaching out other departments of social services to seek out assistance to create a Kinship Resource Home Unit, a pilot program that

focuses primarily resources homes for Kin. Second Chance in Allegany County in Pennsylvania is providing technical support to assist with the new project.

On **3/26/24** a meeting was held with the ***Prince George's County Department of Social Services***. Mr. Walter Jackson, Assistant Director indicated that it had been determined that Ms. Gloria Brown-Burnett former Director for the Department has taken on a position at central DHS as the new Deputy Director of Operations. At this time, it has not been determined who will be the new Director moving forward. This meeting was an opportunity to bring CRBC up to speed on the status of the Department. In short, Mr. Jackson provided updates on the new staff that are in place and his hopes for additional staff when the need arises. He shared the wellness indicators for young people receiving timely annual, dental and vision exams are at 90%. The Department will continue to manage the work in real time to minimize issues and concerns. He also mentioned that they have incorporated wellness rooms for staff when they need a moment to calm down or take a breather to regroup. They have a total of 432 children in care as of this meeting.

On **4/2/24** a meeting was held with the ***Baltimore County Department of Social Services***. Mr. Mark Millspaugh is the new Director since Dr. Branch no longer works for the Department. In short, Mr. Millspaugh provided an update on the staff shortages as well as an interim Assistant Director for Child Welfare since Theresea Cunningham retired. He too discussed the KinFirst Culture and what the Department has been doing on a regular basis and has been for quite some time. The Department has 3 dedicated units specifically for kinship placements to ensure that the necessary steps are taking place to speed up placements. To increase best practices, the Department has also been exploring other types of Evidence Based Practice Models under the First Family Act to continue to improve outcomes. Mr. Millspaugh also mentioned that some of his staff have taken their own initiative to seek out a technique called Collaborative Problem Solving designed to assist youth how to problem solve with everyday scenarios. It's not an additional program, but a way of incorporating it into their practice while working with the youth as a supportive model. There are a total of 620 kids in care as of this meeting.

On **4/2/24** a meeting was held with the ***Worcester County Department of Social Services***. In summary, Director Roberta Baldwin indicated that they have been noticing younger children entering care like school age and younger. Since they do have new leadership team, they are in the process of evaluating their practice and determine what is working and what isn't so they can develop some new protocols. Currently, there are no challenges with staff turnovers or shortages, but they do on the other hand have limited resources with specialized treatment placements as well as independent living skills resources for youth 14 years of age and older. To date, they have a total of 26 kids in care as of this meeting.

On **5/10/24** a meeting was held with the ***Kent County Department of Social Services*** Leadership mostly an introduction meeting because there was new staff. One of the concerns discussed was the lack of independent livings skills workshops available for Dorchester, Kent, Caroline, Worcester and Talbott counties for older youth.

On **5/23/24** Provided a training/overview to the ***Prince George's County Department of Social Services*** on the goals and objectives of CRBC and its mandated role to provide oversight. The Department has had several turnovers with staff and this overview provided a firsthand account of

our partnership with departments statewide. Two board members from the region along with the Child Welfare Specialist (CWS) for Prince George's County were also available to present.

## **CRBC FY2024 Legislative Activities**

CRBC has a Children's Legislative Activities Committee (CLAC) and is a voting member of the Coalition to Protect Maryland's Children (CPMC). During this legislative session, CPMC had just begun to reconvene and pulling together other child welfare advocates after a short hiatus. CRBC also was transitioning with a newly acting Administrator within days of the session beginning. The following listed below are factors considered when reviewing the scope of child protection.

### **Criteria: Protection of Children to include but not limited to the following:**

- Child neglect and abuse
- Out of home placement, foster care, guardianship
- Institutions/facilities that house children
- Child exploitation and trafficking
- Behavioral health and treatment (counseling/therapy)
- Child welfare workforce
- Older youth placement
- Health - physical and mental
- Social services
- Education/curriculum/assessments
- Domestic violence
- Sexual harassment or other types of harassment
- In care Juveniles –disciplinary, punishment, penal system
- Reports, records, privacy

### **Bills Reviewed:**

HB0191 -- **Favorable/Support.** ---*Reviewed before.* Requiring the Division of Correction to allow a certain pregnant woman and a certain woman who recently gave birth to transfer to the prerelease unit for women for 1 year following the birth; establishing the Healthy Start Bonding Program to facilitate strong bonds between incarcerated women and their children; and requiring the Division to allow liberal visitation between certain individuals and certain children under certain circumstances.

HB0405 -- **Favorable/Support.** *Reviewed before.* Insufficient information available. -Specifying certain qualifications and training necessary for an individual to be appointed or approved by a court as a custody evaluator; specifying that certain expert evidence is admissible in certain child custody and visitation proceedings under certain circumstances; and requiring a court, in any action in which child support, custody, or visitation is at issue to provide information to the parties regarding the role, availability, and cost of a custody evaluator.

HB0644 -- **Unfavorable/Oppose** – *Reviewed before.* **CPMC and NASW wrote opposing testimony.** Requiring a local department of social services or a law enforcement agency to provide certain notice to a parent or caretaker of a child at a certain time during an investigation of suspected child abuse or neglect; and excluding evidence obtained in violation of the Act from being used in certain judicial or administrative proceedings.

HB0195 -- **Neutral – but overall supportive.** *Reviewed before.* Requiring a law enforcement officer to make a certain report to a local department of social services after a certain arrest of a certain child under the age of 13 for purposes of a neglect investigation.

SB0314 -- **Unfavorable/Oppose.** Establishing the joint and several civil liability of a parent, guardian, or custodian of a minor who commits an act of willful misconduct that results in the death or injury of an individual or damage to property, subject to a certain exception; requiring the Administrative Office of the Courts to periodically adjust and publish certain maximum liability amounts; and limiting the liability of an insurance provider under the Act.

This bill limits the liability of the parent or guardian of a child who causes death or injury to a person or destruction of property to \$25,000. It also limits the amount that an insurer is obligated to pay to \$10,000. I think this should be handled on an individual basis and dependent upon what the parents can afford. Many can afford more than \$25,000 if a child causes more extensive and expensive destruction. How do you put a limit on the loss of life at \$25,000?

SB0403 -- **Favorable/Support.** Altering the definition of "accredited residential treatment center" for certain provisions of law governing hospitals and related institutions to include residential treatment centers accredited by the Commission on Accreditation of Rehabilitation Facilities or the Council on Accreditation.

HB0833 -- **Favorable/Support.** Establishing a presumption that placement with a child's parent is in the best interest of the child, the child is receiving proper care and attention, and there is not a certain emergency situation if the child's parent is receiving certain substance use disorder treatment; and requiring a local department of social services to file a report with a court if the child was not placed with the parent, describing any difficulties in placing the child with the parent, and efforts by the local department to find a placement for the child. Whenever a child is not returned to the child's parent, guardian, or custodian, the local department shall immediately file a petition to authorize continue shelter care.

HB0508 -- **Favorable/Support.** Adding labor trafficking by a child's parent or guardian to the list of conditions under which a local department of social services is authorized to ask the juvenile court in a child in need of assistance proceeding to find that reasonable efforts to reunify a child with the child's parent or guardian are not required; and expanding provisions of law relating to the Safe Harbor Regional Navigator Grant Program to apply to child victims of labor trafficking.

HB0542 -- **Favorable/Support.** Requiring the Department of Human Services to establish and maintain a decentralized supply of new luggage to be used to transport the personal belongings of a child in foster care; requiring the Department to provide new luggage to a child who is being removed from a household, unless the child is changing placement and is in possession of luggage

previously provided by the Department; and requiring the Department to maintain certain records regarding luggage and children in foster care.

SB0670 -- **Favorable/Support.** Requiring the court, in determining the appropriate allocation of custody or visitation between the parties that is in the best interest of the child, to consider the ability of each of the parties to meet the child's developmental needs, the relations between the child, the parties, the siblings and other relatives, the ability of each party to meet the child's day-to-day needs and certain other factors; and requiring the court to articulate certain findings of fact on the record.

SB0708 -- **Favorable.** Altering provisions of law relating to the kinship care program in the Department of Human Services and certain procedures for the placement of children in need of out-of-home placement.

HB0772 -- **Favorable/Support.** Prohibiting a health care provider from knowingly engaging in or causing certain medical or surgical procedures to be performed on a minor without the consent of the parent, guardian, or custodian of the minor if performed for the purpose of attempting to alter the appearance of, or affirm the minor's perception of, the minor's gender or sex and the appearance or perception is inconsistent with the minor's sex; establishing certain penalties for a violation of the Act.

HB0772 #2 **Outside of our purview.** Prohibiting a person from selling an Internet-connected device that is intended for minors unless the device is sold with a certain filter, certain privacy settings, and other features; making a violation of the prohibition an unfair, abusive, or deceptive trade practice that is subject to the enforcement and penalties under the Maryland Consumer Protection Act; requiring that preference be given to certain grant applications that include the use of broadband providers that implement the use of certain filters; etc.

HB0963 -- **Favorable/Support.** Prohibiting a person from committing sexual solicitation of a minor or human trafficking within 5 miles of certain locations; and increasing the distance surrounding certain school property within which a person is prohibited from committing a certain crime relating to drug distribution from 1,000 feet to 5 miles. Establishing that a violation of the Act is a felony and punishable with imprisonment up to 15 years.

HB0937 -- **Favorable/Support.** Requiring a local director of a local department of social services or the Secretary of Human Services to disclose certain reports and records of child abuse and neglect within 30 days after receiving a request if certain conditions are met; requiring the Secretary to notify the State's Attorney's office of a request to disclose certain reports and records of child abuse and neglect; requiring the State's Attorney's office to be given 30 days during which the office is authorized to redact certain portions of the reports and records; etc.

SB0732 -- **Favorable/Support.** Requiring the Department of Juvenile Services and the Maryland Department of Health to establish a certain inpatient program for children who have been

adjudicated delinquent to provide rehabilitation, comprehensive care, and holistic therapies that address health, mental health, and substance abuse issues.

HB0849 -- **Favorable/Support.** Establishing the Universal Basic Income for Transition-Age Youth Program in the Department of Human Services to provide for the economic security of individuals aging out of the out-of-home placement program; providing that payments made under the Program may not be considered income or resources for purposes of determining eligibility for certain benefits; and requiring the Department to report annually by October 1 to the General Assembly including descriptive information and outcome measures of recipients. **Hearing date March 6, 2024**

HB1100 -- **Generally Favorable/Support. (CPMC Opposed)** Requiring child advocacy centers to report annually to the Behavioral Health Administration certain information related to behavioral health care services provided at the center; requiring the Administration to include in its annual report certain information related to child advocacy centers; and authorizing the Secretary of Health to investigate certain complaints related to child advocacy centers. **(need more information on why CPMC opposed but otherwise, favorable for CLAC)**

HB1311 **Outside of our purview but would be supportive.** Requiring, beginning January 1, 2025, all devices activated in the State to enable a certain filter to prevent minors from accessing obscene material; prohibiting a certain person from deactivating the filter; providing that a manufacturer of a device and certain persons are subject to civil and criminal liability for certain conduct related to device filters; authorizing the Attorney General to take certain actions against persons who violate the Act; etc.

HB1254 **Generally Favorable/Support. However, concerns about background checks every 5 years. Also, the bill does not address minors who volunteer or who are employed and under 18. The bill addresses volunteers and adult employees but not those who are still considered minors and might have issues that could negatively impact children, e.g., sexual abuse.** Requiring certain individuals to submit to a criminal history records check before the individual is authorized to have a position involving direct contact with children in a licensed child care center, registered family child care home, or registered large family child care home; requiring the State Department of Education to establish a dedicated unit to process certain criminal history records checks; requiring the Department of Human Services to provide notice of child abuse and neglect clearance for employees at child care centers; etc.

HB 1453 - BILL WITHDRAWN (too many gaps in information) -- Advocacy Centers. For the purpose of establishing the Foster Care Families Child Care Assistance Program 4 in the State Department of Education to provide child care assistance through 5 subsidies and scholarships to eligible foster care families; requiring the Department 6 to administer the Program in accordance with federal law and to establish a process 7 that meets certain requirements for granting subsidies and scholarships to foster 8 care families under the Program; establishing the Foster Care Families Child Care 9



Assistance Fund as a special, no lapsing fund to award certain subsidies under the 10 Program; and generally relating to the Foster Care Families Child Care Assistance 11 Program and Fund.

HB0065 -- **Opposed**. Concerns about the safety of the child if the consultation needs to remain private, e.g., suicide prevention, child abuse, sexuality, etc. Requiring a school health practitioner, health care practitioner, or certified school psychologist employed by or under a contract with a school-based health center, local school system, or local health department to provide school health services at a public school to provide certain information to a certain student's parent or guardian about any consultation, diagnosis, or treatment provided to the student.

## **CRBC Out-of-Home Placement Case Reviews**

### Targeted Review Criteria

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

### Reunification:

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

### Adoption:

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

### Another Planned Permanent Living Arrangement (APPLA):

- Already established plans of APPLA for youth 16 years of age and younger. CRBC will conduct a full review of a child 16 years of age and younger who has an established primary permanency plan of APPLA. The primary purpose of the review is to assess appropriateness of the plan and review documentation of the Federal APPLA requirements.
- Newly established plans of APPLA. CRBC will conduct a review of a child within 5 months after the

establishment of APPLA as the primary permanency plan. Local Boards will review cases to ensure that local departments have made adequate and appropriate efforts to assess if a plan of APPLA was the most appropriate recourse for the child.

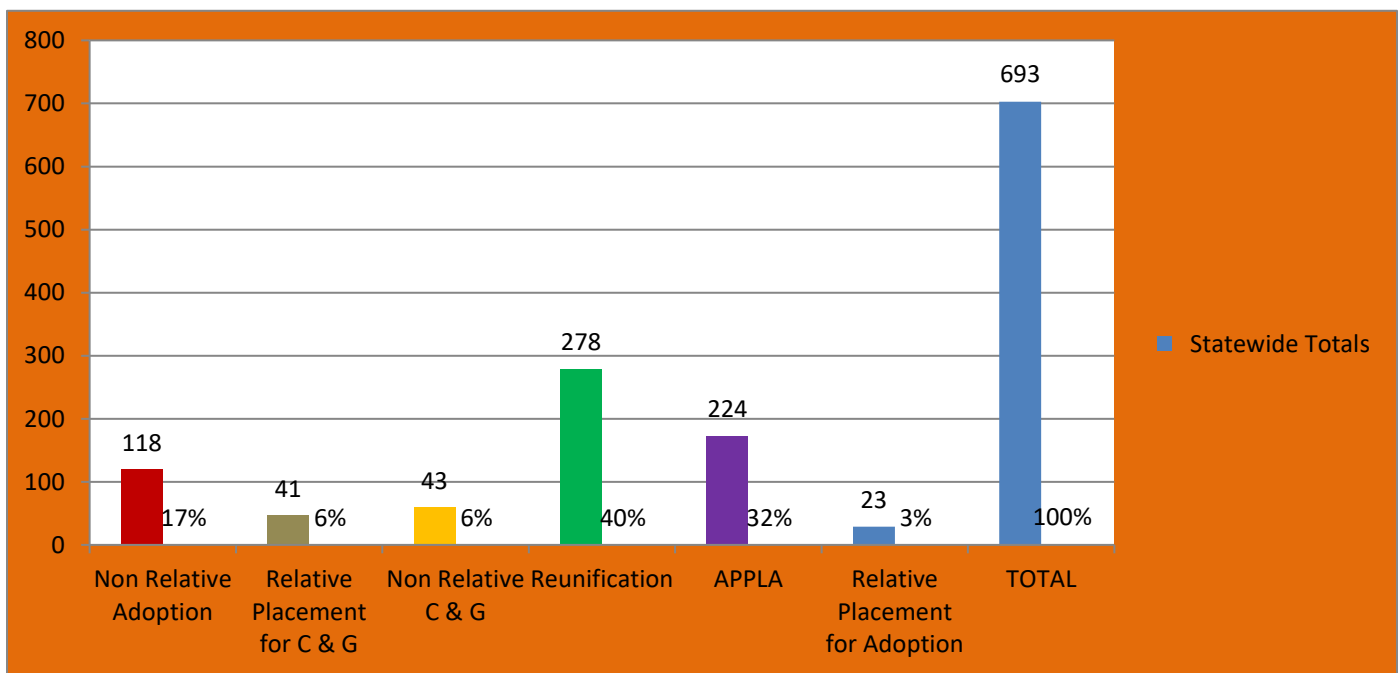
Older Youth Aging Out

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

Re-Review Cases:

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

CRBC FY2024 Case Review Findings by Permanency Plan



Gender Totals (693)

Male	Female
338 (49%)	355 (51%)

Male

Non-Relative Adoption	Relative Placement for C & G	Non-Relative C & G	Reunification	APPLA	Relative Placement for Adoption
67 (10%)	22 (3%)	21 (3%)	122 (18%)	98 (14%)	8 (1%)

Female

Non-Relative Adoption	Relative Placement for C & G	Non-Relative C & G	Reunification	APPLA	Relative Placement for Adoption
51 (7%)	19 (3%)	22 (3%)	102 (15%)	146 (21%)	15 (2%)

Ethnicity Overall (693)

African American	Caucasian	Asian	Other
438 (63%)	211 (30%)	7 (1%)	37 (5%)

Age Range by Permanency Plan

[RE] = Reunification  
 [RA] = Relative Placement for Adoption  
 [RG] = Relative Placement for Custody & Guardianship  
 [AD] = Non-Relative Adoption  
 [CG] = Non-Relative Custody & Guardianship  
 [AP] = Another Planned Permanent Living Arrangement (APPLA)

AGE RANGE	RE	RA	RG	AD	CG	AP	Totals
age 1 thru 5	22	16	6	45	6	0	95
age 6 thru 10	44	6	7	33	4	0	94
age 11 thru 13	52	0	11	21	9	0	93
age 14 thru 16	69	1	12	15	17	7	121
age 17 thru 19	34	0	4	4	7	129	178
age 20	3	0	1	0	0	108	112
<b>Totals</b>	<b>224</b>	<b>23</b>	<b>41</b>	<b>118</b>	<b>43</b>	<b>244</b>	<b>693</b>

## CRBC FY2024 Case Reviews by Jurisdiction & Permanency Plans

Jurn #	County	Non Relative Adoption	Relative Placement for C & G	Non Relative C & G	Reunification	APPLA	Relative Placement for Adoption	TOTAL	Boards held
01	Allegany	3	1		2	2	3	11	3
02	Anne Arundel	3	3	3	8	14		31	8
03	Baltimore County	17	3	4	31	29	3	87	24
04	Calvert	1			7	3		11	2
05	Caroline	2			2			4	1
06	Carroll	1			5	2		8	2
07	Cecil	6		2	2	3	2	15	4
08	Charles	2		1	1	7		11	3
09	Dorchester	4			3	1		8	2
10	Frederick	10			3	6		19	5
11	Garrett				2	2		4	1
12	Harford	6	1		15	9	1	32	8
13	Howard		6		3	2	1	12	3
14	Kent	1			1			2	1
15	Montgomery	16	6	5	25	28	1	81	21
16	Prince George's	8	3	4	26	37	1	79	20
17	Queen Anne				1	1		2	1
18	Saint Mary's	11		2	1	4		18	4
19	Somerset				3	1		4	1
20	Talbot	1	1			2		4	1
21	Washington	2		1	6	8	1	18	5
22	Wicomico		2	1	2	3		8	2
23	Worcester	1				3		4	1
49	Baltimore City	23	15	20	75	77		220	60
	<b>Statewide Totals</b>	<b>118</b>	<b>41</b>	<b>43</b>	<b>224</b>	<b>244</b>	<b>23</b>	<b>693</b>	<b>183</b>
	<b>Percentages</b>	<b>17%</b>	<b>6%</b>	<b>6%</b>	<b>32%</b>	<b>35%</b>	<b>3%</b>	<b>100%</b>	

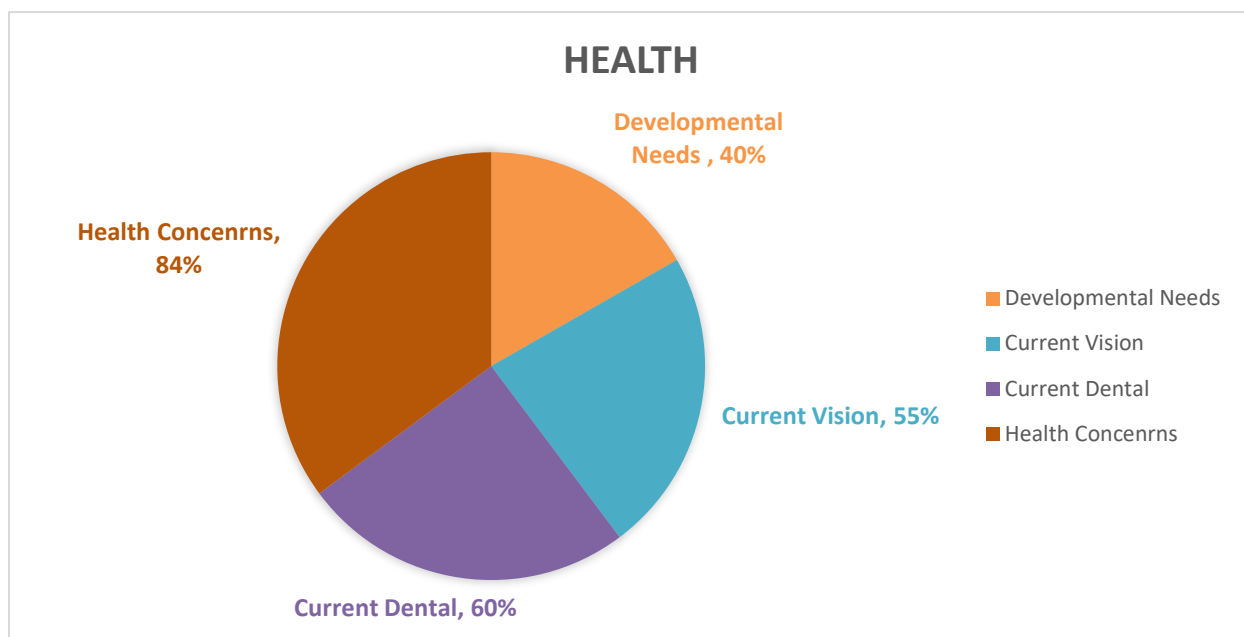
CRBC conducted a total of 693 individual out-of-home case reviews (each case reviewed represents 1 child/youth) in 24 jurisdictions on 186 board that held reviews during fiscal year 2024.

- The local Boards agreed with the permanency plan for 603 (87%) of 693 cases reviewed.

### Health/Mental Health

- Current Physical: 507 (73%) out of the 693 children/youth had current physical.

- Developmental Needs: 275 (40%) out of 693 children/youth had developmental needs.
- Current Vision: 380 (55%) out of 693 children/youth had current vision.
- Current Dental: 416 (60%) out of 693 children/youth were current on Dental Exams.
- Health Concerns: The local department ensured that appropriate follow-up occurred on 293 (84%) out of the 347 children/youth.



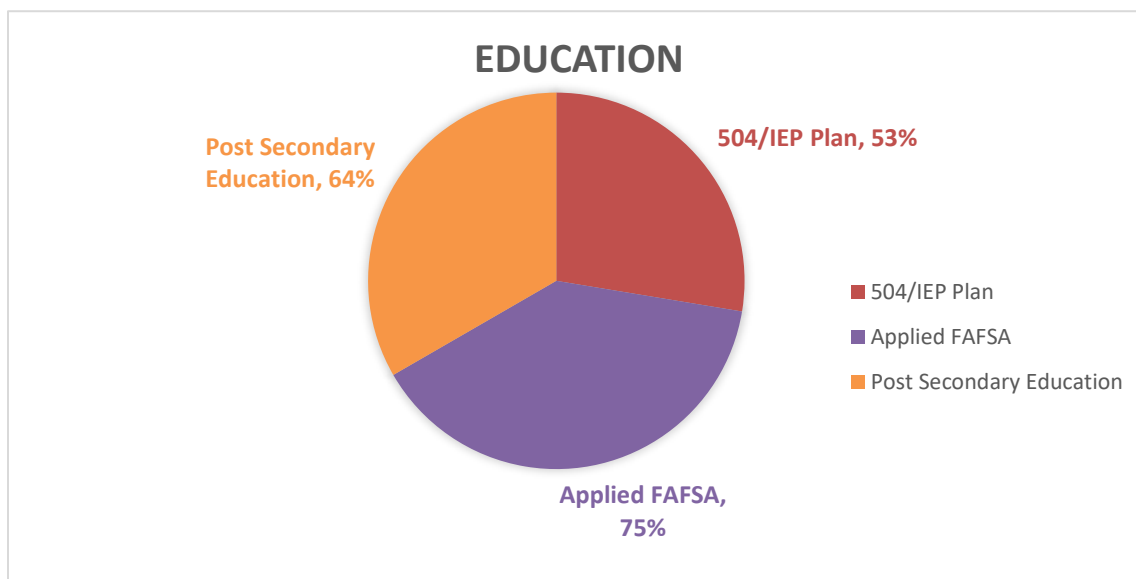
- Prescription Medication: 293 (42%) out of 693 children/youth were on Prescription Medication.
- Prescription Medication Monitored: Prescription Medication was regularly monitored for 288 (98%) out of 293 children/youth.
- Psychotropic Medication: 240 (35%) out of 693 children/youth were on Psychotropic medication.
- Psychotropic Medication Monitored: Psychotropic Medication was monitored at least on a quarterly basis for 233 (97%) out of the 240 children/youth.
- Prescribed Medication: 88 (35%) out of 255 children/youth refused Prescribed Medication.
- Mental Health: 486 (70%) out of the 693 youth/children had mental health issues.
- Mental Health Diagnosis: 491 (71%) out of the 693 youth/children had a mental health diagnosis.
- The Local Boards agree that the Mental Health Issues were addressed for 376 (75%) out of the 502 children/youth.

- 186 (86%) out of the 217 children/youth who were transitioning and were identified as having a Mental Health Issue has an identified plan to obtain services in the adult mental health care system.
- Standard Health Exams: 48 (7%) out of the 693 youth/children refused to have a standard exam.
- Completed Medical Records: 288 (42%) out of the 693 youth/children had completed medical records.

The Local Boards agree that the health needs for 320 (46%) out of the 693 youth/children were met.

### Education

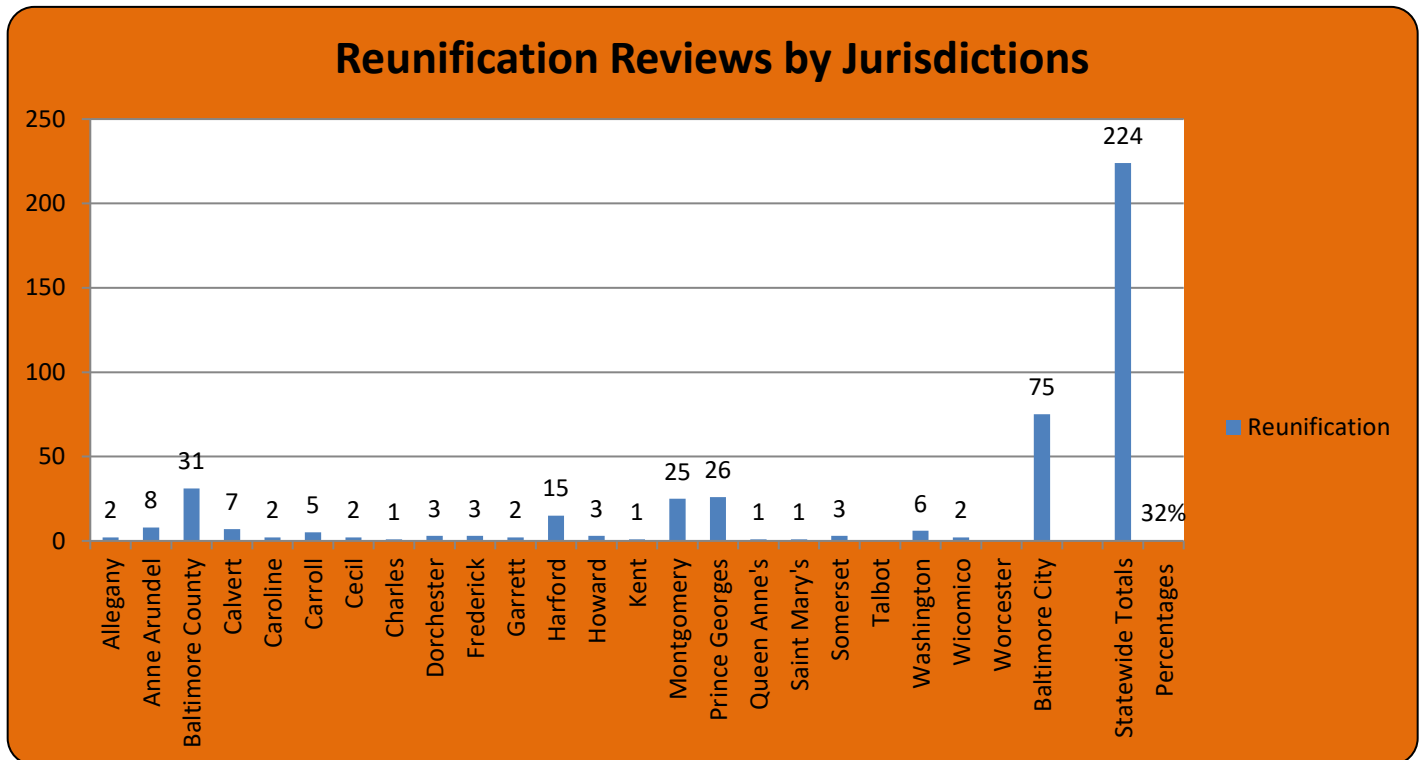
- 245 (53%) out of the 466 youths were enrolled in school had a 504 or IEP plan.
- A current progress report card was available to review for the 254 of the youth enrolled in school.
- 90 (64%) out of the 140 youths had concrete plans for post-secondary education.
- 36 (75%) of the 48 youths pursuing higher education were found to have applied for FAFSA.
- 70 (31%) out of 229 youth that were disabled and exiting school were aware of and engaged with community supports.



The Local Boards agreed that 413 (79%) out of 524 youths were being appropriately prepared to meet their educational goals.

## Reunification Case Reviews

The permanency plan of Reunification is generally the initial goal for every child that enters out-of-home placement and appropriate efforts should be made to ensure that the child/youth is receiving the services that are necessary to reunite with their family and have permanency. It is equally as important to make sure that reasonable efforts have been made with the identified parent or caregiver to promote reunification without undue delay. Forty percent of the cases reviewed had a permanency planning goal of reunification.



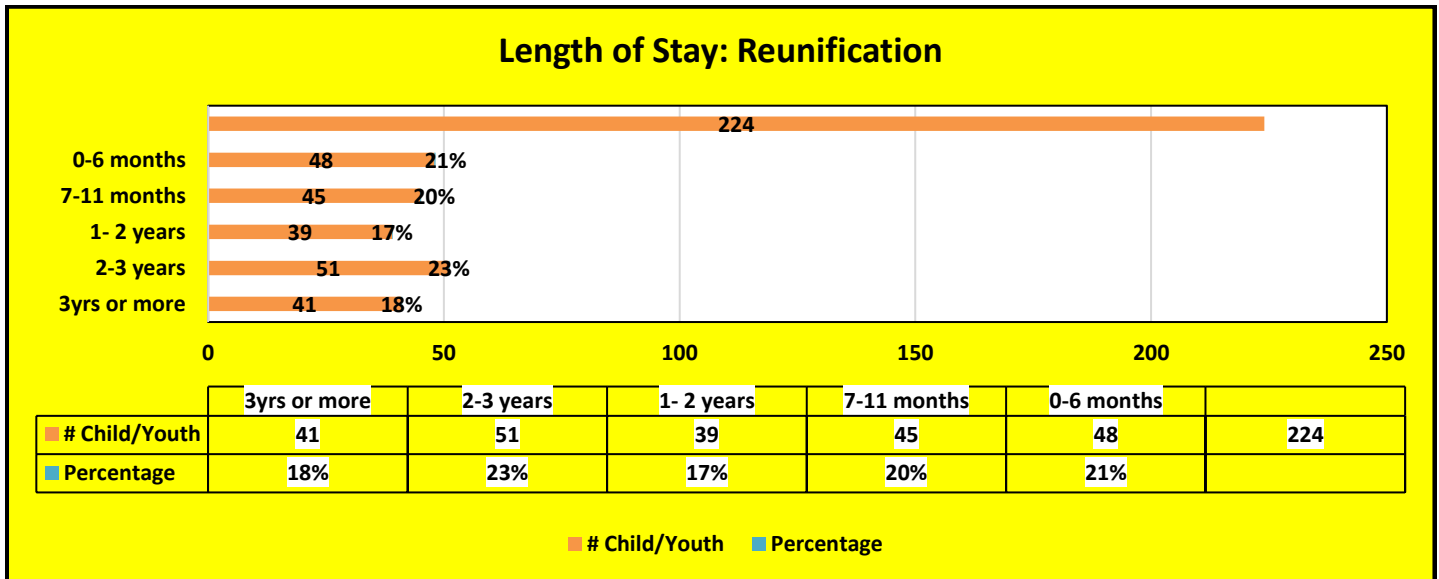
Age Range	Statewide Totals	Reunification	Percentage
Age 1 thru 5	95	22	23%
Age 6 thru 10	94	44	47%
Age 11 thru 13	93	52	56%
Age 14 thru 16	121	69	57%
Age 17 thru 19	178	34	19%
Age 20	112	3	3%
<b>Total</b>	<b>693</b>	<b>224</b>	<b>32%</b>

Permanency

The local boards agreed with the permanency plan of reunification for 146 (65%) of the 224 cases reviewed.

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

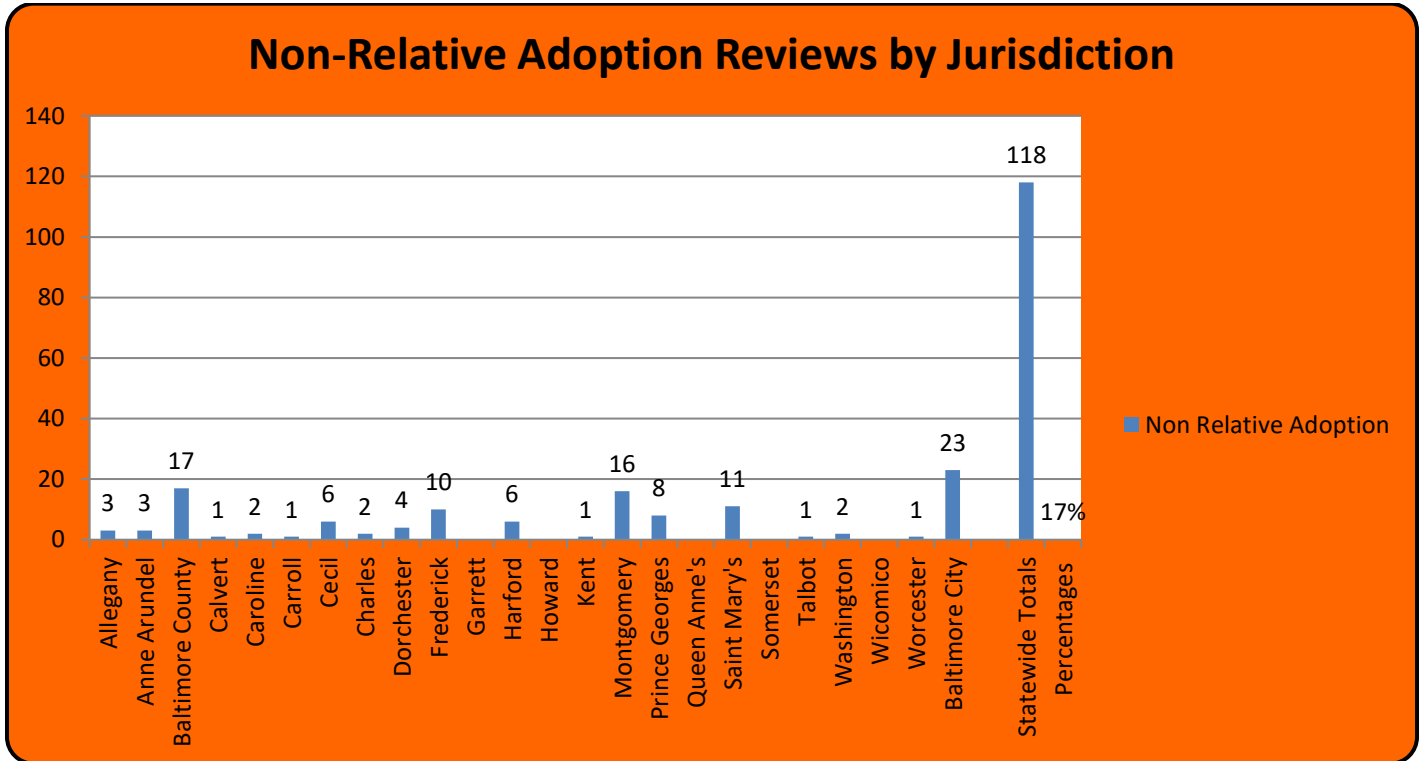
The local boards found that the lengths of stay for the 224 children/youths with a plan of Reunification were as follows:





## Non-Relative Adoption Case Reviews

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



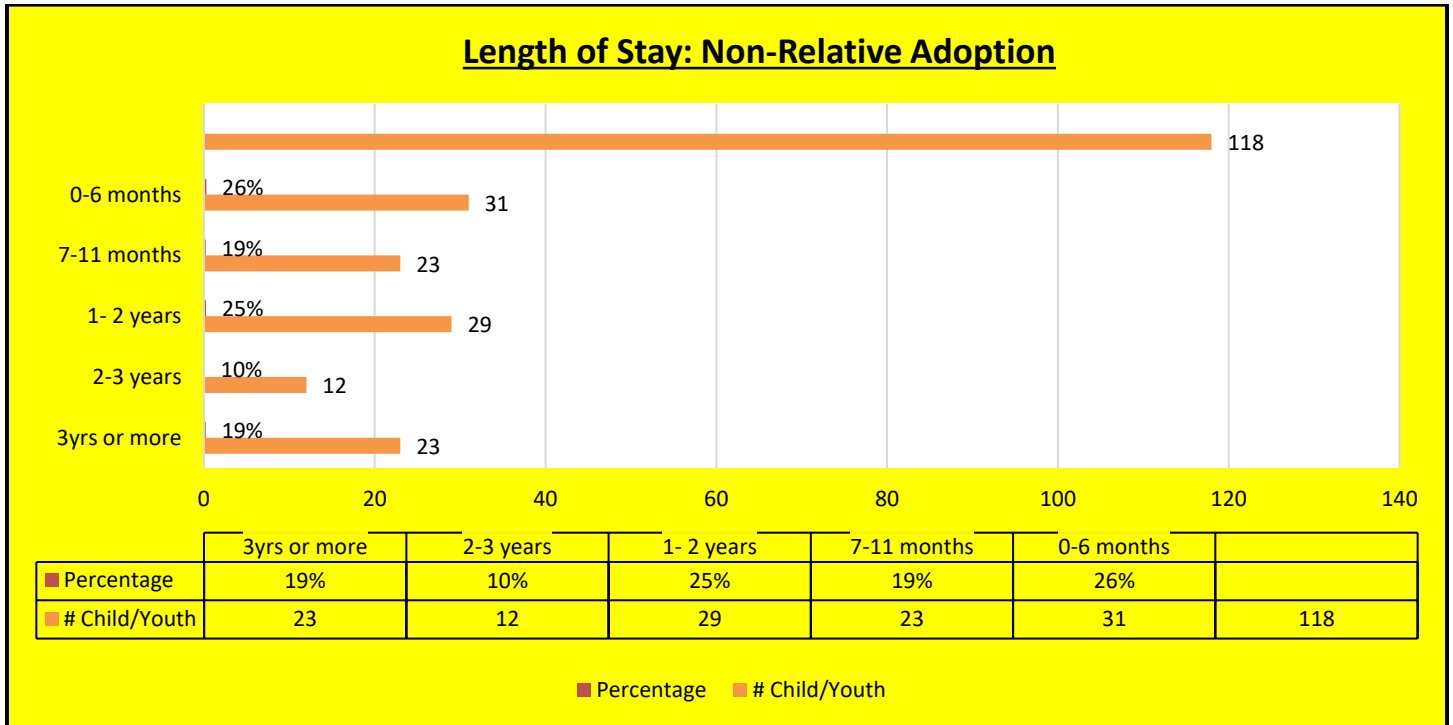
Age Range	Statewide Totals	Adoption	Percentage
Age 1 thru 5	95	45	47%
Age 6 thru 10	94	33	35%
Age 11 thru 13	93	21	23%
Age 14 thru 16	121	15	12%
Age 17 thru 19	178	4	2%
Age 20	112	0	N/A
<b>Total</b>	<b>693</b>	<b>118</b>	<b>17%</b>

Permanency

The local boards agreed with the permanency plan of Non-Relative Adoption for 117 (99%) of the 118 cases reviewed.

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

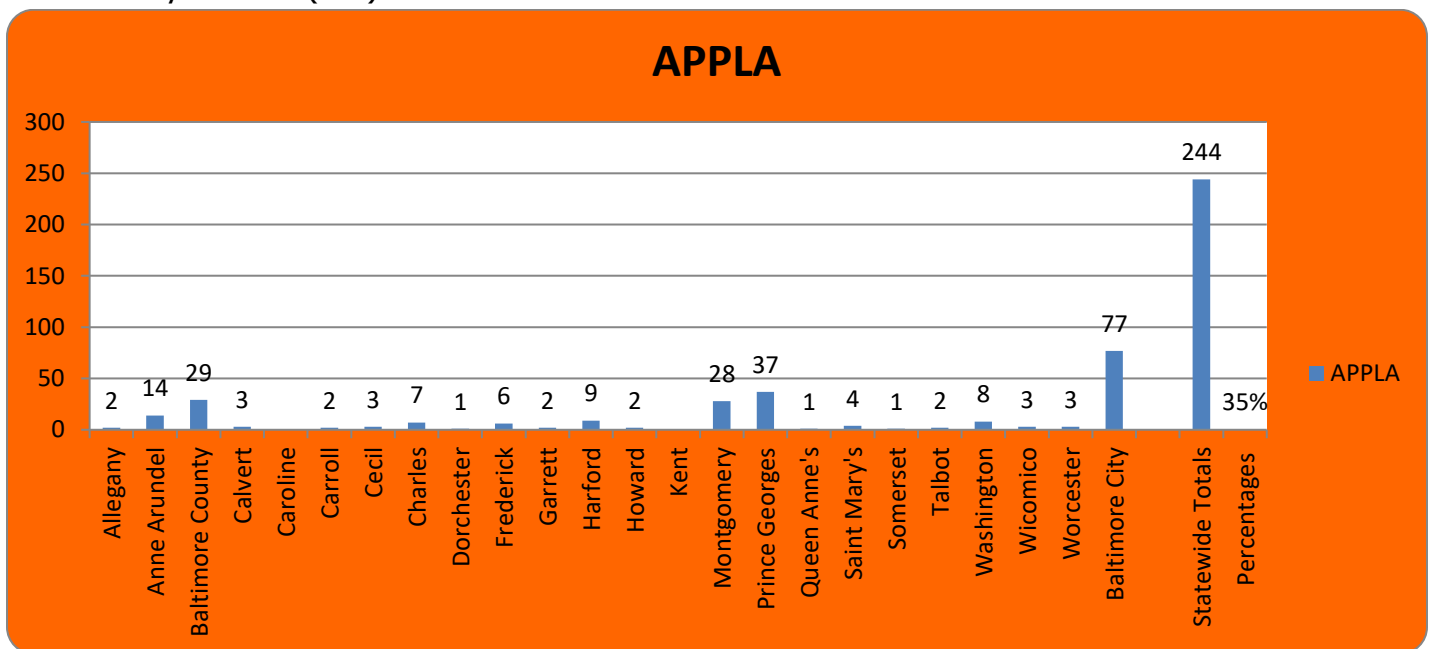
The local boards found that the lengths of stay for the 118 children/youths with a plan of Non-Relative Adoption were as follows:



## **APPLA Reviews** **(Another Planned Permanent Living Arrangement)**

APPLA is the least desired permanency plan. All efforts should be made to rule out all other permanency plans including reunification with birth family, relative placement for custody and guardianship or adoption, adoption to a non-relative and guardianship to a non-relative before a child/youth's permanency plan is designated as APPLA.

Out of the total number of 693 cases reviewed, 244 (35%) of the cases had a plan of APPLA. Baltimore City had the most cases at 77 (32%), Prince George's County 37 cases (15%), Baltimore County 29 cases (12%), Montgomery County 28 cases (11%), Anne Arundel County 14 cases (6%), Harford County 9 cases (4%), Washington County 8 cases (3%), Charles County 7 cases (3%) and Cecil County 3 cases (1%).



Age Range	Statewide Totals	APPLA	Percentage
Age 1 thru 5	95	0	N/A
Age 6 thru 10	94	0	N/A
Age 11 thru 13	93	0	N/A
Age 14 thru 16	121	7	6%
Age 17 thru 19	178	129	72%
Age 20	112	108	96%
<b>Total</b>	<b>693</b>	<b>244</b>	<b>35%</b>

Permanency

The local boards agreed with the permanency plan of APPLA for all 244 (100%) of the total cases reviewed.

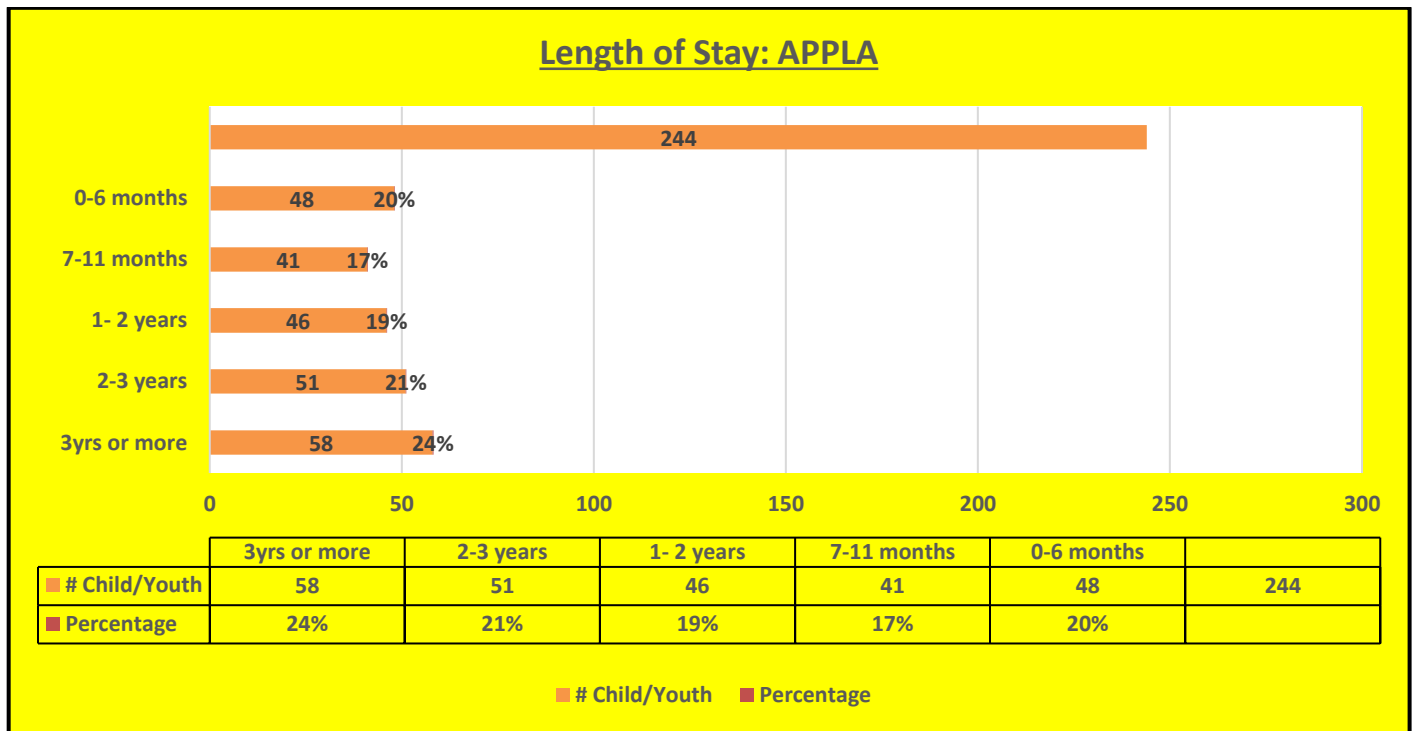
- 7 reviews with the plan of APPLA, the youths were between the ages of 14 thru 16.
- 129 reviews with the plan of APPLA, the youths were between the ages of 17 and 20.
- 108 reviews with the plan of APPLA, the youths were age 20 and above.

Length of stay Child/Youth had a plan of APPLA

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

Length of stay Child/Youth had a plan of APPLA

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



## Ready by 21

### Independent Living Services

- 244 (60%) youths received appropriate services to adequately prepare for independent living when they leave out of home care.
- 227 (56%) of the youths completed a Life Skills Assessment.
- 233 (57%) of the youths received required independent living skills.

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

### Employment (Age 14 and Older)

- 161 (40%) of youth participated in paid or unpaid work experience.
- 153 (38%) of 407 youths participated in paid or unpaid work relevant to career field of choice.
- 140 (34%) of youth were referred by caseworkers to summer or year-round training and employment opportunities.
- 66 youths were identified as being 20 years old and earning a living wage.

The Local Boards agreed that in 182 cases that the child/youth was being appropriately prepared to meet employment goals.

### Housing (20 and with APPLA only)

- 86 (82%) out of the 105 youths who were transitioning out of care had specified housing.
- 89 (85%) of the youths transitioning out of care were provided with alternative housing options.

The Boards agreed with the transitional housing plan for 85 youths.

The Boards agreed that 83 (79%) out of the 105 youths were appropriately prepared for transitioning out of care.

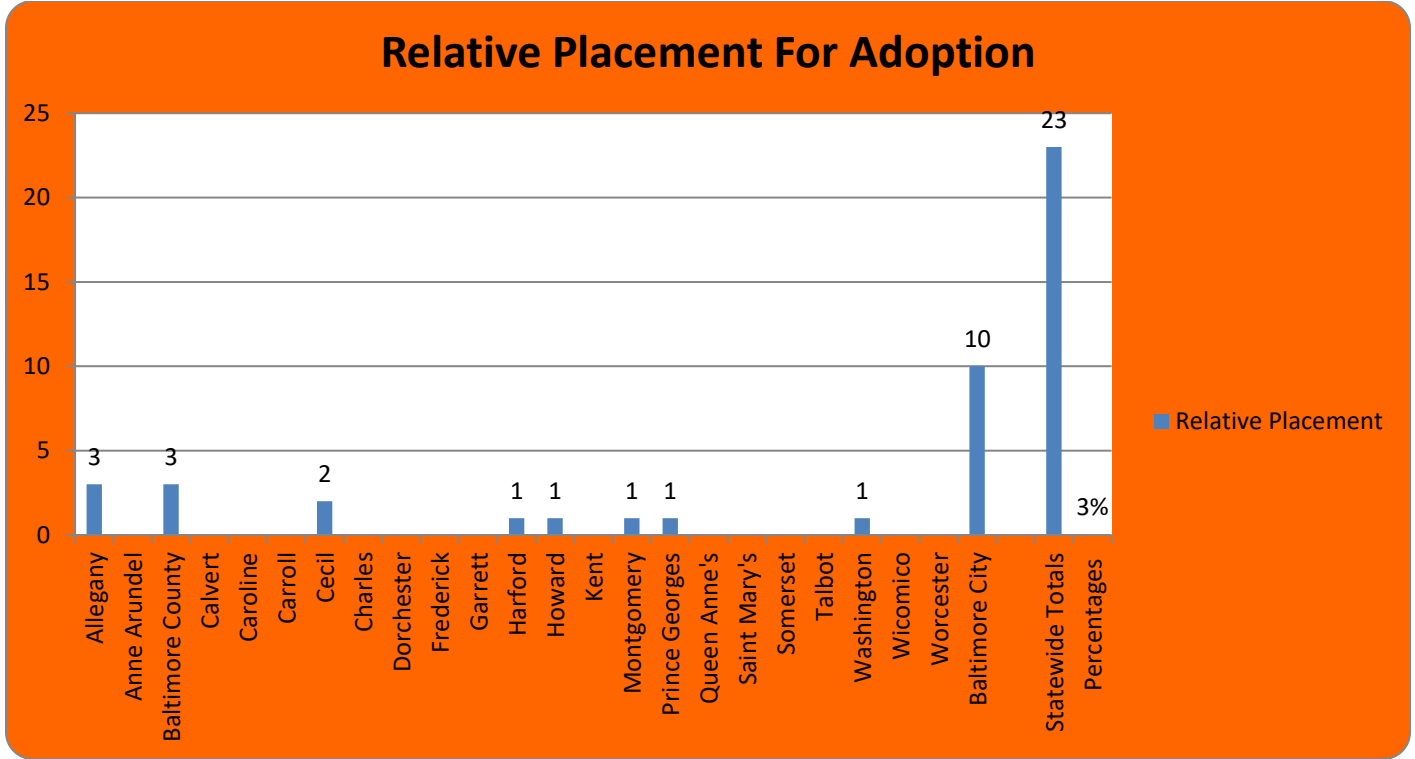
### Permanent Connections (APPLA only)

The LDSS identified 220 (90%) out of the 244 cases reviewed as a permanent connection for the child.

The Local Board found the identified permanent connection appropriate for 218 (89%) of 244 cases.

## Relative Placement for Adoption Case Reviews

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



### Category of Relative Placement

- Relative Placement for Adoption: 23 cases

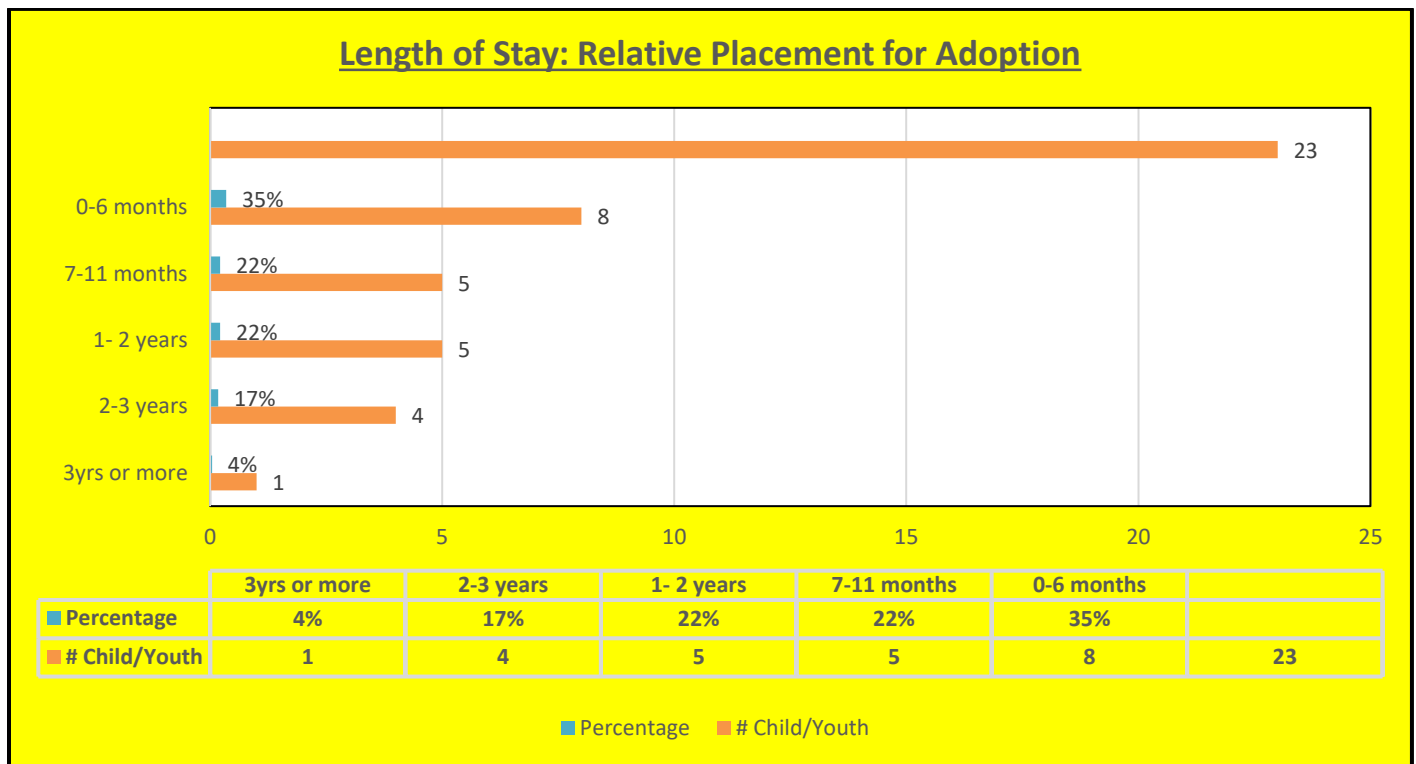
Age Range	Totals	Relative Placement	Percentage
Age 1 thru 5	95	16	17%
Age 6 thru 10	94	6	6%
Age 11 thru 13	93	0	N/A
Age 14 thru 16	121	1	1%
Age 17 thru 19	178	0	N/A
Age 20	112	0	N/A
<b>Total</b>	<b>693</b>	<b>23</b>	<b>3%</b>

## Permanency

The local boards agreed with the permanency plan of relative placement for all 23 (100%) of the cases reviewed.

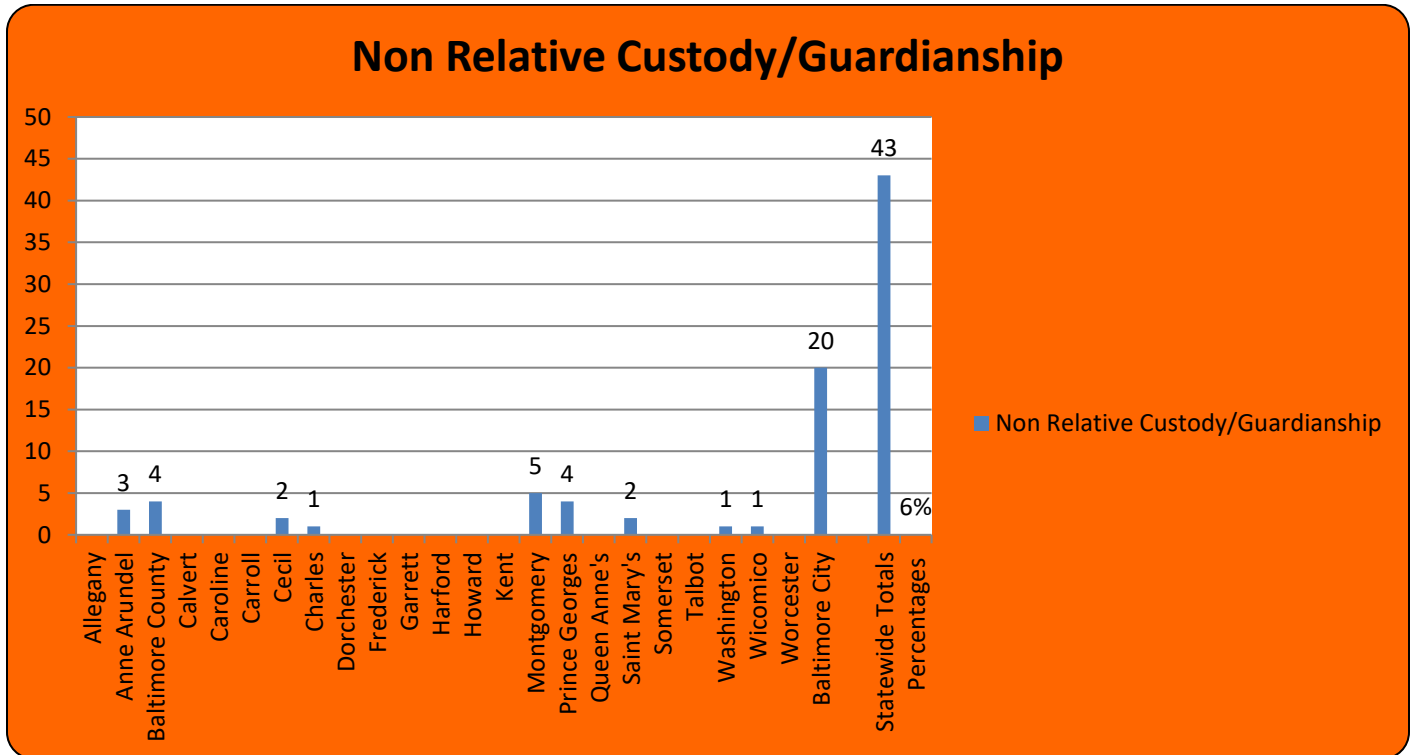
### Lengths of Stay for Children/Youth with a plan of Relative Placement for adoption

The local boards found that the length of stay of the 23 children/youths with a plan of Relative Placement for Adoption were as follows:



## Non-Relative Custody/Guardianship Reviews

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



Age Range	Statewide Totals	Custody/Guardian	Percentage
Age 1 thru 5	95	6	6%
Age 6 thru 10	94	4	4%
Age 11 thru 13	93	9	10%
Age 14 thru 16	121	17	14%
Age 17 thru 19	178	7	4%
Age 20	112	0	N/A
<b>Total</b>	<b>693</b>	<b>43</b>	<b>6%</b>

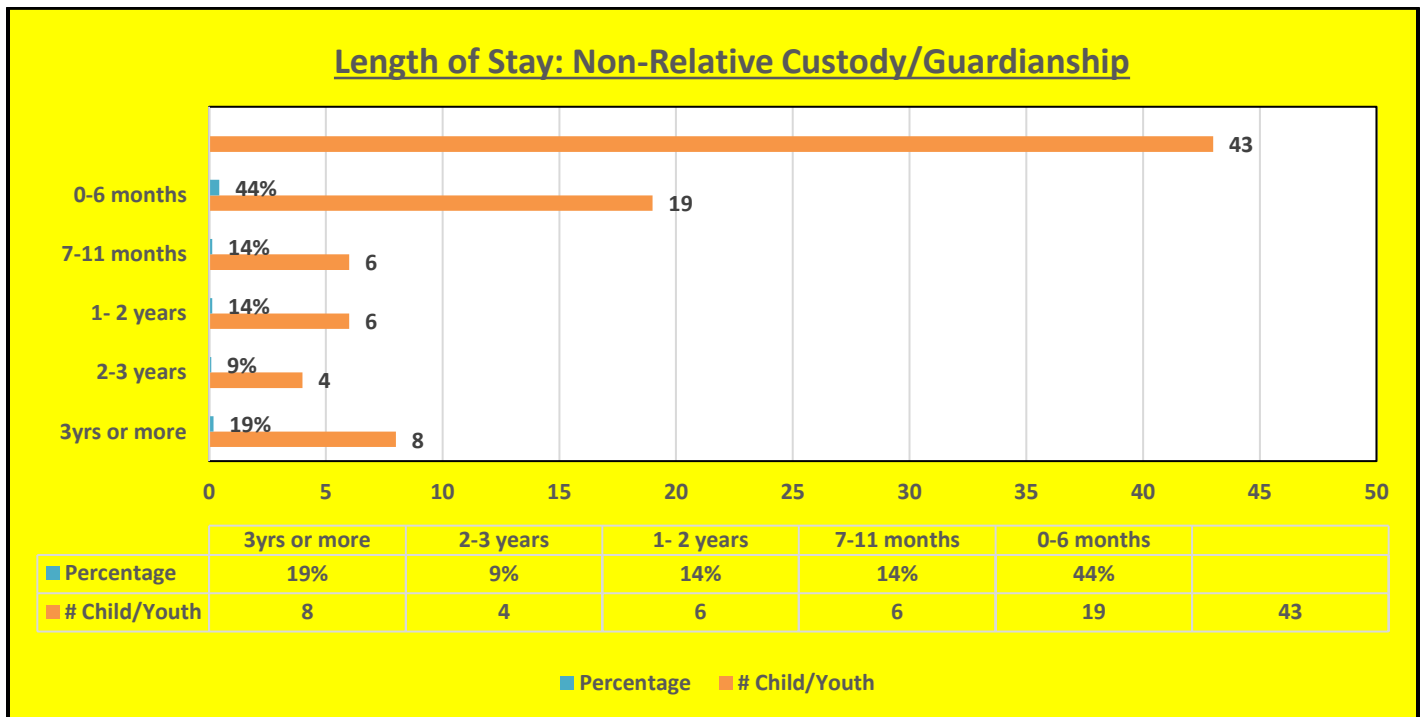


Permanency

The local boards agreed with the permanency plan of Non-Relative Custody/Guardianship for 35 (81%) of the 43 cases reviewed.

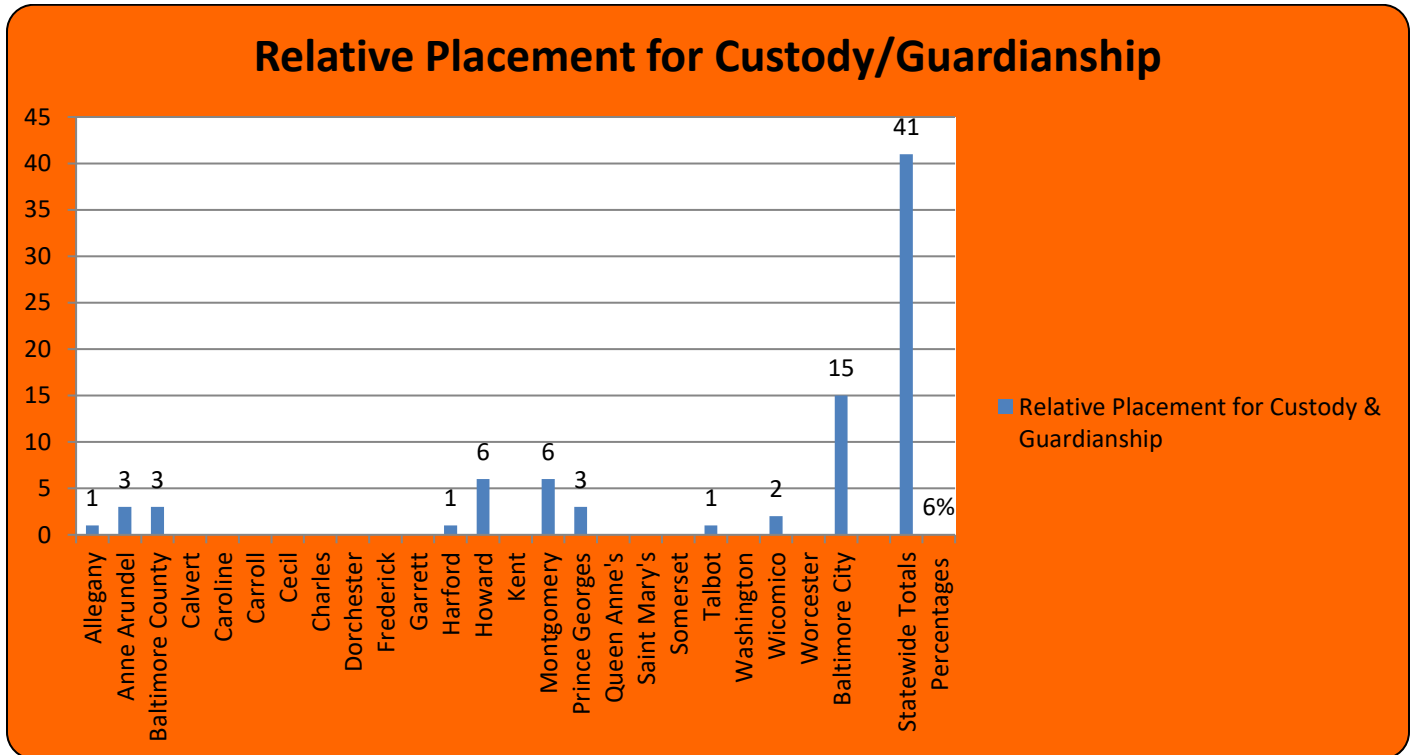
Lengths of Stay for Children/Youths with a plan of Non-Relative Custody/Guardianship

The local boards found that the lengths of stay of the 43 children/youths with a plan of Non-Relative Custody/Guardianship were as follows:



## Relative Placement for Custody/Guardianship

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



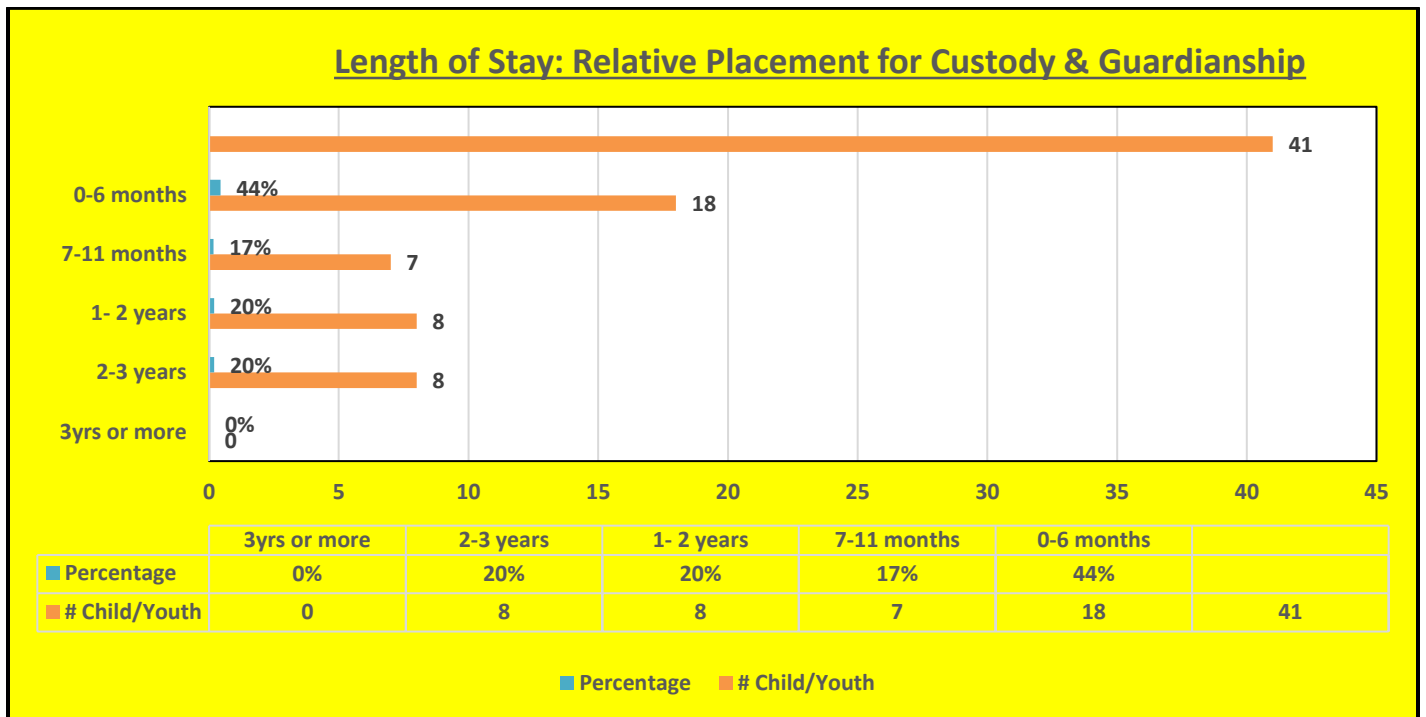
Age Range	Statewide Totals	Relative Placement Custody/Guardian	Percentage
Age 1 thru 5	95	6	6%
Age 6 thru 10	94	7	7%
Age 11 thru 13	93	11	12%
Age 14 thru 16	121	12	10%
Age 17 thru 19	178	4	2%
Age 20	112	1	1%
<b>Total</b>	<b>693</b>	<b>41</b>	<b>6%</b>

Permanency

The local boards agreed with the permanency plan of Relative Custody/Guardianship for 38 (93%) of the 41 cases reviewed.

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

The local boards found that the lengths of stay of the 41 children/youths with a plan of Relative Custody/Guardianship were as follows:



Summary

Based on the findings of the review, the local boards determined that the local Department of Social Services made adequate progress towards a permanency plan (COMAR – 07.01.06.05 (F)) for 581 (84%) of the 693 total cases reviewed.

**CRBC FY2024 State Board**

Nettie Anderson-Burrs (Chair)

Circuit 4: Representing Allegany, Garrett, and Washington Counties

Delores Alexander (Vice Chair)

Circuit 3: Representing Baltimore and Harford Counties

Dr. Theresa Stafford

Circuit 1: Representing Dorchester, Somerset, Wicomico, and Worcester Counties

Vacant

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

Vacant

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

Sandra "Kay" Farley

Circuit 6: Representing Frederick and Montgomery Counties

Davina Richardson

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

Beatrice Lee

Circuit 8: Representing Baltimore City

Rita Jones

Circuit 8: Representing Baltimore City

Benia Richardson

Circuit 8: Representing Baltimore City

Denise E. Wheeler  
CRBC Administrator

Crystal Young  
Acting Administrator

**CRBC FY2024 Members\***

Virginia From	Tabatha Phipps	Charlene Myers-Hough
Jane Sheehan	Sandra Shapiro	Samirah Brown
Troy Anderson	Karen Robbins	Kimberly Elder
Genna Lee	Terry Adirim	Michelle Morrissette
Mariana Byrant	Sarah David	Wesly Hawkins
Juliet Pearrell	Jonathan DiPietro	Daniel Russell
Emily McCoy	Starlin Weaver	Cordero Kimbrell
Barbara Peace	Tammy Fraley	Tyrika Hendricks

**\*New members appointed by the Governor in FY2024**

**CRBC Staff Members**

Denise E. Wheeler  
Administrator

Crystal Young, MSW  
Assistant/Acting Administrator

Hassan Aslam  
Information Technology Officer

Hope Smith  
IT Functional Analyst

LeShae Harris  
Office Clerk II

Michele Foster, MSW  
Child Welfare Specialist

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

Nikia Greene  
Child Welfare Specialist

Sandy Colea, CVA  
Volunteer Activities Coordinator Supervisor

Lakira Whitaker  
Volunteer Activities Coordinator II

Agnes Smith  
Executive Assistant

Cindy Hunter-Gray  
Lead Secretary

## **References**

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

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

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

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

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

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

Maryland Code, Family Law § 5-539

Maryland Code, Family Law § 5-545

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

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

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

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

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

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