

Maryland Department of Human Services Social Services Administration

Continuous Quality Improvement

CFSR Results Report

Baltimore City Department of Social Services

April & May 2023

October & November 2023



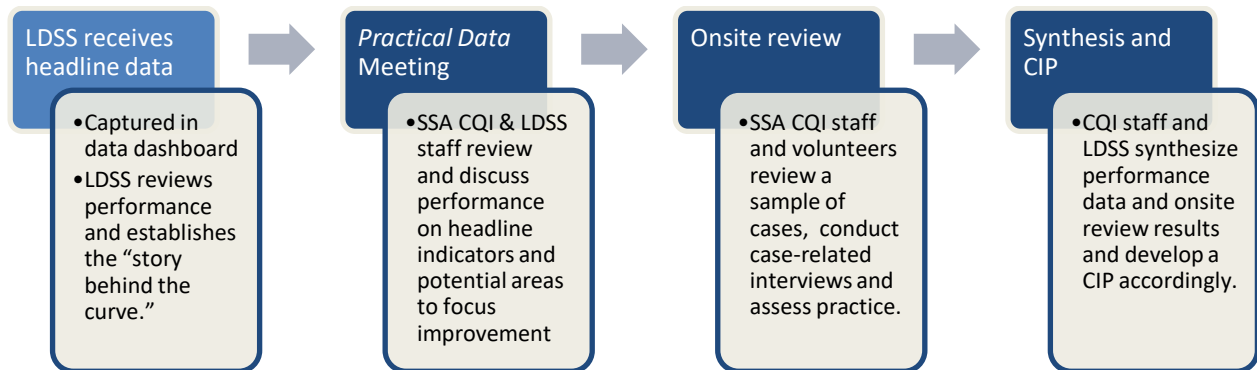
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I. Maryland's Continuous Quality Improvement (CQI) Overview

Maryland's CQI process is designed to align with SSA's strategic vision, and support our enhanced integrated practice model, effective utilization of comprehensive assessments and expanded/aligned service array. Quality CQI efforts are dependent upon the **active inclusion and participation of staff at all levels of the agency, children, youth, families, and stakeholders** throughout the process. CQI is a **partnership between LDSSs, DHS/SSA, and others** to jointly assess practice and work towards better outcomes for children, youth, families, and vulnerable adults.

As part of Maryland's CQI process, each local department, in partnership with SSA, will undergo a Maryland Child and Family Services Review (CFSR). This review, which aligns with the federal review process, focuses on child and family safety, permanency and well-being outcomes. The review is designed to combine evidence from various sources to highlight the strengths and areas of challenge in the local system of care which are impacting child and family outcomes.

The Maryland CFSR currently involves three interrelated components¹: 1) a **Practical Data Meeting** with focused discussion on the local department's performance on the headline data indicators and the story that provides context for that performance 2) an **onsite review** which examines the agency, local court and provider child welfare practices to achieve positive outcomes for children; by reviewing a sample of cases, and, 3) the development of a **continuous improvement plan** (CIP) to guide the LDSS's improvement efforts based on the findings of the data meeting and onsite review). Please review the MD CQI Manual for more detail on the overall CFSR process. A high-level diagram of the CFSR review process is below.



This report focuses on the findings of the onsite review and the Practical Data Meeting. During the onsite review, a review team uses a review instrument to assess the quality of practice and the functioning of processes that support the achievement of child and family outcomes related to safety, permanency and well-being. Reviewers combine information from interviews with key case participants and the record in CJAMS to complete the review using the instrument. More

¹ *Practical Data* meetings are currently in place but may not have been conducted in every jurisdiction. As a result, information from this meeting is not in every local jurisdiction's report. Additionally, SSA intends to add focus groups with local staff, managers and community stakeholders to elicit information on local systemic drivers and other aspects of practice not included in the OSRI.

detailed information on the case review instrument and the process for assessing cases is in appendix A. This report also provides SSA's feedback on local department strengths, areas needing attention, and then provides recommendations for continued exploration and improvement for consideration in the local department's continuous improvement plan.

SSA would like to thank and commend Baltimore City Department of Social Services Director, Brandi Stocksdale, Assistant Director for Adult, Family & Children's Services, Stephanie Cooke, and the Child Welfare program administrators, supervisors, caseworkers, families, youth, and the entire DSS child welfare staff for their efforts in making the CFSR onsite review a successful endeavor.

II. Practical Data Meeting

Prior to the onsite review, SSA and the LDSS held an Orientation and Practical Data Meeting on August 10, 2023 to discuss the LDSS's performance on SSA's headline indicators. The headline indicators are aggregate measures of performance related to safety, permanency and well-being. Based on a review of the data, Baltimore City DSS highlighted the following indicators as areas of performance to explore further:

- Permanency
 - Permanency in 12 months for new entries
 - Permanency in 12 months for children in care 12-23 months
 - Permanency in 12 months for children in care 24+ months

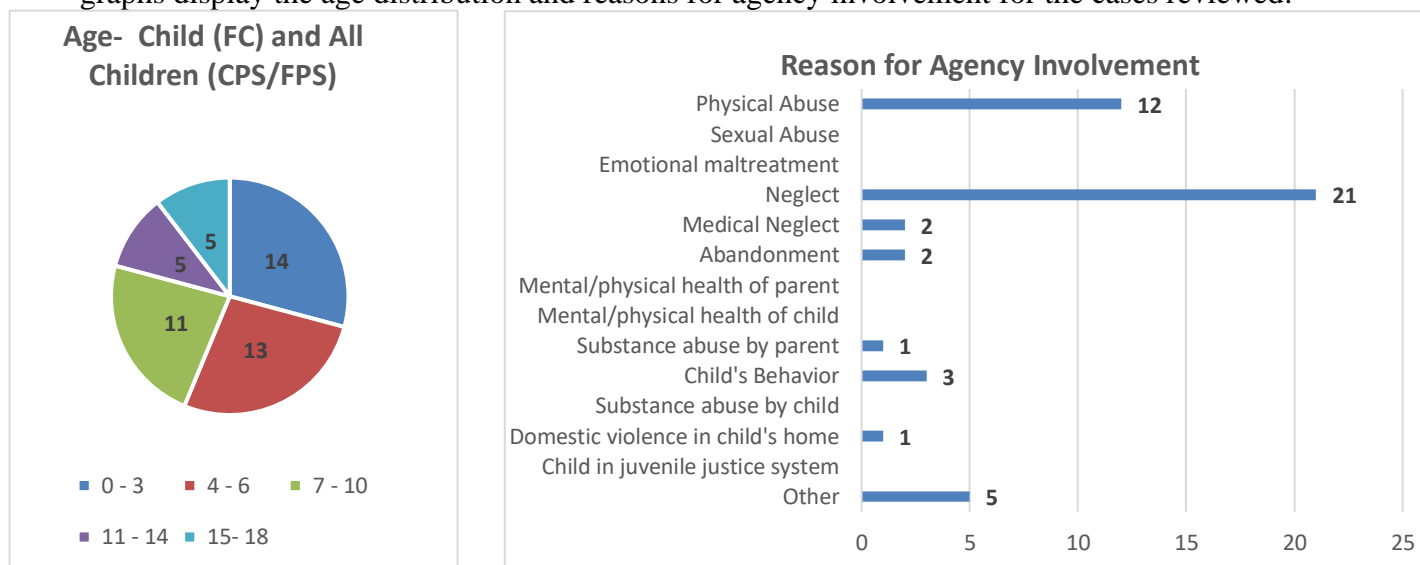
The LDSS shared some key examples/their assessment of the practice and systemic factors impacting performance. Key findings include:

- Permanency
 - Staffing challenges have been a hinderance and impacted out-of-home staffs' ability to work reunification with families timely. The agency reported that out-of-home staff are carrying caseloads of approximately 20 cases and feel that they are spread too thin to effectively work with families towards achieving permanency for children and youth in care.
 - Substance abuse and substance-exposed newborns have been the reason for many entries which creates barriers in achieving reunification within 12 months as it is often not enough time to adequately address substance abuse issues with families. Additionally, the courts tend to allow the parents more time to work towards resolving the issues that led to entry, especially when they are related to substance abuse and/or mental health. However, the agency reported that they utilize the Family Recovery Program, and it has been helpful in engaging families with substance abuse concerns.

This discussion provided context for the onsite review and the practice that may be demonstrated through the case review.

III. Baltimore City Onsite Review Methodology and Case Characteristics

The Baltimore City onsite review was conducted in the spring from April 10, 2023, through April 17, 2023 and May 8, 2023 through May 15, 2023. The spring review assessed performance during a period under review (PUR) from April 1, 2022 until the date each specific case was first reviewed onsite. The onsite review was conducted in the fall from October 16, 2023 through October 23, 2023 and November 13, 2023 through November 20, 2023. The fall review assessed performance during a period under review (PUR) from October 1, 2022 until the date each specific case was first reviewed onsite. The review team assessed a total of 37 cases, including 26 foster care cases and 11 cases of families who received in-home services; two (2) Investigative Responses (IR), five (5) Alternative Responses (AR) and four (4) Family Preservation services cases. The following graphs display the age distribution and reasons for agency involvement for the cases reviewed.



Although these cases were randomly selected using a stratified methodology, this sample of cases may or may not be representative of Baltimore City's entire child welfare population. SSA considers the case review findings and observations, nonetheless, to be reflective of practice that exists in the local department and a basis for further exploring strengths and areas needing improvement.

IV. Baltimore City Onsite Review Findings

Appendix B provides a summary of case ratings by item and outcome for the review. Below we provide a narrative description of the item, number of applicable cases and the practice observed in the cases. Note that not all cases are applicable for each item. The item performance for a case can be rated as a strength, area needing improvement or not applicable. The tables present the percentage of applicable cases that received a strength rating.

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

Safety Outcome 1	Applicable Cases	Strength Rating (%)
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Item 1	17	94.1%
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Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment. *Assesses whether responses to all accepted child maltreatment reports received during the period under review were initiated, and face-to-face contact with the child(ren) made, within the time frames established by agency policies or state statutes.*

Sixteen (16) out of the 17 applicable cases for Item 1 were rated as a Strength. The agency was able to make face-to-face contact with victim children within the state-mandated timeframes. For the majority of applicable cases, contact was made with the victim child(ren) within 24 hours of report acceptance.

In the one (1) case rated an Area Needing Improvement (ANI), in this case the agency did not make face-to-face contact with the victim children in a timely manner and the review did not show any valid reasons or barriers for the delay.

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

Safety Outcome 2	Applicable Cases	Strength Rating (%)
Item 2	11	90.9%
Item 3	37	89.2%

Item 2: Services to Family to Protect Children in the Home and Prevent Removal or Re-Entry into Foster Care. *Assesses whether, during the period under review, the agency made concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after a reunification.*

Ten (10) of the 11 applicable cases for this item were rated as a Strength. One (1) of these cases was an In-Home services case in which services were provided to ensure that the children in the family could be maintained safely in their home. The remaining nine (9) cases were foster care cases; in seven (7) of these cases, the agency determined that safety-related services were unable to be provided due to the emergent circumstances of the case, which resulted in the children entering foster care during the period under review (PUR). In the last two (2) cases, the agency provided the family with substance use treatment in order to attempt to maintain the children safely in their homes; however, these children ultimately entered foster care during the PUR due to ongoing safety concerns.

The one (1) case rated as an Area Needing Improvement (ANI) for this item was a foster care case in which the review determined that a child was removed from the home without first attempting to provide services to the biological parent to prevent the removal. In this case, the service that was not provided was mental health treatment.

Item 3: Risk and Safety Assessment Management. *Assesses whether, during the period under review, the agency made concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care.*

Of the 37 cases reviewed, 33 were rated as a Strength for this item. The agency demonstrated consistent use of formal assessments of both safety and risk, including the Safety Assessment for Every Child (Safe-C), Safety Assessment for Every Child in Out of Home Placement (SAFE-C OHP), Maryland's Formal Initial Risk Assessment (MFIRA), and Maryland's Formal Risk Reassessment (MFRRA). In addition to formal assessments, the agency engaged biological parents, providers, and age-appropriate children in comprehensive, initial, and ongoing informal assessments of safety and risk. In seven (7) of these cases, the agency developed a safety plan with the biological parents and other important individuals from the family to ensure the safety of the children in the home. The agency engaged the family through conversations during home visits, including unannounced visits, in order to monitor the safety plans in place.

Four (4) of the cases reviewed were rated an Area Needing Improvement (ANI). All four (4) of these were foster care cases that received this rating because the safety of children who remained in the home was not assessed on an ongoing basis during the PUR.

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

Permanency Outcome 1	Applicable Cases	Strength Rating (%)
Item 4	26	76.9%
Item 5	26	65.4%
Item 6	26	50.0%

Item 4: Stability of Foster Care Placement. *Assesses whether the child in foster care is in a stable placement at the time of the onsite review and that any changes in placement that occurred during the period under review were in the best interests of the child and consistent with achieving the child's permanency goal(s).*

Twenty (20) of the 26 applicable cases for this item were rated as a Strength. In the majority (24) of these cases, the target child only had one placement during the PUR and the placement was determined to be stable. In two (2) cases the target child experienced a placement change during the PUR but this move was determined to be in the child's best interest as they were able to be placed with relatives. For all cases rated a Strength, the agency accurately assessed the stability of placements by engaging placement providers and age-appropriate children in ongoing conversations about the stability of the placement.

In the six (6) cases that were rated an Area Needing Improvement (ANI), children experienced placement changes during the PUR that were not made in their best interest or in an effort to achieve case goals. In the majority of these cases, the review showed that placement providers were having difficulty managing the behaviors or developmental disabilities of the children in their care and services were not provided to them in order to support their ability to maintain the placement. As a result, placement disruptions occurred.

Item 5: Permanency Goal for Child. *Assesses whether appropriate permanency goals were established for the child in a timely manner.*

Of the 26 applicable cases for this item, 16 were rated as a Strength. The agency and courts established the permanency goals of reunification, guardianship, and adoption within a timely

manner during the PUR and these goals were appropriate based on the circumstances of the case. Concurrent planning was seen in the majority of cases (12) with the most common goals being reunification concurrent with guardianship. Further, all cases rated a Strength were NA for Termination of Parental Rights (TPR) because the child had not been in foster care for 15 out of the most recent 22 months (11), an exception to TPR existed (4), or TPR had already been granted (1).

Ten (10) cases reviewed for this item were rated an Area Needing Improvement (ANI). In the majority of these cases, the review determined that the goal of reunification was no longer appropriate given the circumstances. In addition, in several cases the agency had not filed for TPR or filed an exception to TPR within the mandated timeframe.

Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanency Living Arrangement. *Assesses whether concerted efforts were made, or are being made, during the period under review to achieve reunification, guardianship, adoption, or other planned permanent living arrangement.*

Of the 26 applicable cases, half (16) were rated a Strength. Of these 16 cases, permanency was achieved in six (6) of them. The agency and courts were able to achieve permanency within the timeframe by providing services to families to achieve reunification. Specifically, the agency provided families with substance use treatment, mental health treatment, and parenting classes. The agency was also able to work with a kinship provider to achieve guardianship and ensured that a permanent living arrangement was formally identified for a youth with a goal of APPLA. In the remaining cases, although permanency has not yet been achieved the agency and courts are still within the timeframe of achieving the goals and were demonstrating progress towards the goals during the PUR.

The other half (13) of applicable cases were rated an Area Needing Improvement (ANI) because permanency was not or will not be achieved within the mandated timeframes. When the goal was reunification, delays in achievement stemmed from not providing the family with appropriate services to support the achievement of reunification. For goals of guardianship and adoption, delays were found to be in identifying resources and completing paperwork to move the process forward.

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

Permanency Outcome 1	Applicable Cases	Strength Rating (%)
Item 7	12	91.7%
Item 8	23	65.2%
Item 9	26	73.1%
Item 10	24	79.2%
Item 11	23	52.2%

Item 7: Placement with Siblings. *Assesses whether, during the period under review, concerted efforts were made to ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings.*

Eleven (11) of the 12 cases applicable for this item were rated a Strength. In six (6) of these cases the target child was placed with their sibling(s) in foster care throughout the PUR. In the five (5) remaining cases, although the target child was separated from their sibling, the review showed a valid reason for their separation. Reasons for separation included one sibling requiring a higher level of care, a large sibling group, and siblings being able to be placed with their relatives. The review showed that the agency made concerted efforts to place children with their siblings in foster care as appropriate.

In the one (1) case that was rated an Area Needing Improvement (ANI) the target child was not placed with their sibling who was also in foster care and the review did not show a valid reason for their separation.

Item 8: Visiting with Parents and Siblings in Foster Care. *Assesses whether, during the period under review, concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members.*

Of the 23 applicable cases for this item, 15 were rated as a Strength. The review showed that in the majority of cases rated a Strength, the agency developed visitation plans with applicable biological parents. The frequency of visits ranged from weekly to monthly and was appropriate given the circumstances of the cases. Further, the review showed that in many cases the agency increased the frequency of visitation or progressed from supervised to unsupervised visitation during the PUR as appropriate.

The eight (8) remaining cases were rated as an Area Needing Improvement (ANI). In four (4) of these cases, the agency did not develop a visitation plan or ensure that visitation occurred between target children and their biological or stepfathers. In three (3) cases the agency did not develop a visitation plan or support visitation between target children and their biological mothers. In the last case, the agency did not ensure that the target child had visits with their sibling who was placed separately from them in foster care. Further, the quality of visits with the biological mother were impacted by visits only being offered virtually despite there being no barriers to holding visits in-person.

Item 9: Preserving Connections. *Assesses whether, during the period under review, concerted efforts were made to maintain the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school, and friends.*

Nineteen (19) cases were rated a Strength for this item. The agency engaged biological parents, relative foster parents, adult siblings, and age-appropriate children in determining who the target child had an important connection to that should be maintained upon entry into foster care. The agency was able to identify connections to biological parents, maternal and paternal relatives, fictive kin, community, and peers. When important connections were identified, the agency supported these connections by arranging visits, encouraging and supporting foster parents to maintain connections, and arranging for telephone calls. Further, in the four (4) cases rated a Strength where the target child changed schools, the review showed that a Best Interest

Determination meeting was held to ensure that this school change was in the target child's best interest.

The remaining seven (7) cases were rated as an Area Needing Improvement. In the majority of these cases, the agency was aware that an important connection existed, but the review did not show any effort on the part of the agency to maintain these connections. These connections included biological fathers, siblings who were not in foster care, maternal grandparents, maternal aunts and uncles, and paternal relatives. In one (1) case that was rated an ANI, the review determined that the target child had important connections to aunts, uncles, cousins, and adult siblings, and the agency was unaware of these connections.

Item 10: Relative Placement. *Assesses whether, during the period under review, concerted efforts were made to place the child with relatives when appropriate.*

Of the 24 applicable cases for this item, 19 were rated as a Strength. In 11 of these cases, the target child was placed with a relative during the PUR and their placement was stable. In the remaining eight (8) cases the agency engaged biological parents in conversations in order to identify, locate, inform, and evaluate relatives as potential placement resources. When relatives were identified, the agency evaluated them and, in the majority of these cases, they were permanently ruled out by the agency.

The five (5) remaining cases were rated an Area Needing Improvement (ANI). In four (4) of these cases the review showed that the agency did not have any conversations with the biological parents in order to identify potential relative resources. Specifically, in 2 of these cases, the biological father was the biological parent who was not engaged in these conversations. In the last case, the agency identified maternal relatives but did not evaluate them as a potential placement resource for the target child during the PUR.

Item 11: Relationship of Child in Care with Parents. *Assesses whether, during the period under review, concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.*

Twelve (12) of the 23 applicable cases for this item were rated a Strength. In all of the cases rated a Strength, the agency ensured that applicable biological parents were made aware of the target child's medical appointments and encouraged them to attend. The agency also encouraged parents to participate in the target child's therapy and psychiatry appointments and school events when appropriate. Further, the agency ensured that biological parents did not experience any barriers to participating in these activities and provided transportation to biological parents, as needed, to support their attendance. Further, in one case the agency made a referral for the target child and biological parent to participate in family therapy to strengthen their relationship.

The remaining 11 cases were rated an Area Needing Improvement (ANI). In one case the agency did not inform either biological parent of the target child's medical appointments during the PUR or encourage their attendance. The remaining 10 cases were split – in five (5) cases the agency

did not keep the biological mother informed of important events and activities and in five (5) cases the agency did not keep the biological father informed. In four (4) out of the five (5) cases that were an ANI due to the agency's lack of involvement of the biological father, the review showed that the agency did include the biological mother.

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

Well-Being Outcome 1	Applicable Cases	Strength Rating (%)
Item 12	37	51.4%
Item 12A	37	94.6%
Item 12B	35	54.3%
Item 12C	23	87.0%
Item 13	35	57.1%
Item 14	37	94.6%
Item 15	35	48.6%

Item 12: Needs and Services of Child, Parents, and Foster Parents. *Assesses whether, during the period under review, the agency (1) made concerted efforts to assess the needs of children, parents, and foster parents (both initially, if the child entered foster care or the case was opened during the period under review, and on an ongoing basis) to identify the services necessary to achieve case goals and 9 adequately address the issues relevant to the agency's involvement with the family, and (2) provided the appropriate services.*

Item 12A: Needs and Services of Child

Of the 37 cases reviewed, this item was rated a Strength in 35 cases. In the majority of these cases the agency assessed the social emotional needs of children informally, through conversations with biological parents, placement providers, and age-appropriate children. The agency also informally assessed through observations of the children's interactions with their caregivers and with other children in the home. In the majority of cases, there were no social emotional needs identified for the children; however, when needs were identified the appropriate services were provided. Some of these services included family therapy, mentoring, and opportunities for peer socialization. For children who were 16 years or older, the agency formally assessed their Independent Living Skills using the Ansell-Casey Life Skills Assessment. For cases where this was applicable, the children were not identified to have any needs that required services. Lastly, in cases where children were placed with an alternative caregiver, the needs of the alternative caregiver were assessed informally through conversations with them during routine home visits. In cases where services were needed, these services were provided by the agency and including Kinship Navigator services and financial assistance.

The two (2) remaining cases were rated an Area Needing Improvement (ANI). In one of these cases the agency did not complete any assessments of the child's Independent Living Skills and there were no identified barriers to doing so. In the second case, the review did not show evidence that the agency assessed a child's social emotional needs related to their relationship with their biological father and, therefore, did not provide any necessary services to address this relationship.

Item 12B: Needs and Services to Parents.

This item was rated a Strength in 19 of the 35 applicable cases. In the majority of these cases the agency assessed the needs of applicable biological parents informally, through conversations with them. When needs were identified, the appropriate services were provided. Some of these services included mental health services, substance use treatment, parenting classes, housing resources, and financial assistance. Once services were put in place, the agency monitored the services to ensure that they continued to meet the needs of the biological parents and that no additional services were needed.

Sixteen (16) cases were rated an Area Needing Improvement (ANI). In four (4) cases, the agency did not provide services or assess the needs of both biological parents on an ongoing basis during the time the case was open. In seven (7) of the 16 cases rated an ANI, the agency failed to engage the biological mother in initial or ongoing assessments of her needs or provide her with the appropriate services necessary to meet identified needs. Finally, in the five (5) remaining cases the agency did not engage the biological father to assess his needs or provide appropriate services.

Item 12C: Needs and Services to Foster Parents.

Twenty (20) of the 23 applicable cases for this item were rated as a Strength. The review determined that in these 20 cases the agency was able to assess the needs of foster parents, both relative and non-relative, through ongoing conversations with them during routine home visits. When needs were identified, the agency provided the foster parent with the appropriate services to address their needs. In the majority of cases, the foster parents were in need of financial assistance, particularly regarding purchasing supplies or furniture to support the placement. Additionally, in several cases the agency was able to assist foster parents in locating daycare providers and also provided financial support for daycare.

The three (3) remaining cases were rated an Area Needing Improvement (ANI). In all three (3) of these cases, the review determined that the agency did not provide the foster parents with the necessary services to support them in managing the behaviors of the target child placed in their home.

Item 13: Child and Family Involvement in Case Planning. *Assesses whether, during the period under review, concerted efforts were made (or are being made) to involve parents and children (if developmentally appropriate) in the case planning process on an ongoing basis.*

Of the 35 applicable cases for this item, 20 were rated a Strength. In all cases rated a Strength, the agency included applicable biological parents and age-appropriate children in initial and ongoing case planning conversations during routine visits with them. Additionally, in one (1) of the foster care cases reviewed the agency utilized Family Team Decision Meetings (FTDM) to discuss case planning with the biological mother and target child. During the agency's case planning conversations with applicable biological parents and age-appropriate children, they typically discussed the safety of the child(ren) in the home or in their foster care placement, the biological parent's needs and progress in services, the child(ren)'s progress in services, and the child(ren)'s

well-being. Additionally, in foster care cases the agency had case planning conversations about the target child's permanency goals and progress towards achieving permanency, as appropriate.

Fifteen (15) cases were rated an Area Needing Improvement (ANI). In all of the cases rated an ANI, it was determined that an applicable biological parent(s) was not included in case planning. In several of the cases it was determined that although the agency did have conversations with the applicable biological parent, these conversations were not comprehensive enough to cover all aspects of case planning. Further, in some cases, the review showed that the agency did not have any case planning conversations with an applicable biological parent and there were no identified barriers to them doing so. Of the 15 cases rated an ANI, the review determined that engagement of case planning was a concern with the applicable biological mother in six (6) cases, the applicable biological father/stepfather in five (5) cases, and with both biological parents in four (4) cases.

Item 14: Caseworker Visits with Child. *Assesses whether the frequency and quality of visits between caseworkers and the child(ren) in the case are sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals.*

Of the 37 cases reviewed, this item was rated a Strength in 35 cases. In all of the foster care cases that were rated a Strength for this item, the agency had at least monthly contact with target children in their placements that lasted anywhere from 30 minutes to an hour. For the in-home cases, the agency's frequency of visits with children ranged from bi-weekly to monthly and lasted from 30 minutes to an hour and the frequency in these cases was appropriate given the circumstances of the case. In all of the cases rated a Strength, the agency had age-appropriate conversations with the children about their safety, permanency (FC only), and well-being.

The two (2) remaining cases were rated an Area Needing Improvement (ANI). In one (1) of these cases, the review determined that the frequency of visits with the target child in a foster care case were not sufficient given the case circumstances. In the second case rated an ANI, the review determined that although the frequency of visits was sufficient, the quality of visits with the children in the home were not sufficient to address the circumstance of the case.

Item 15: Caseworker Visits with Parents. *Assesses whether, during the period under review, the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren) are sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals.*

Of the 35 applicable cases for this item, 18 were rated an Area Needing Improvement (ANI). In the majority of cases that were rated an ANI for this item, the review showed that although the applicable biological parents' whereabouts were known to the agency, the agency did not make sufficient attempts to have visits with them during the PUR. Further, when applicable biological parents were located outside of the state/country, the agency did not make any attempts to have virtual visits with these parents. In several cases, although the agency did have visits with the applicable biological parent the review determined that the frequency of the visits was not sufficient. Specifically, in several cases reviewed the agency had initial contact with an applicable biological parent but did not engage them in ongoing visits. Further, there were circumstances where the quality of visits was not sufficient to address the safety, permanency (FC only), and

well-being of the children. Of the 18 cases rated an ANI, the review determined that engagement in visits was a concern with the applicable biological mother in seven (7) cases, the applicable biological father/stepfather in six (6) cases, and with both biological parents in five (5) cases.

Seventeen (17) cases were rated a Strength. In the cases rated a Strength, both foster care and in-home, the agency's frequency of visits with applicable biological parents ranged from bi-weekly to monthly and lasted anywhere from 15 minutes to an hour. The review determined that the frequency of visits in these cases were sufficient given the circumstances of the case. Further, the visits in these cases were determined to be of good quality as the agency was able to engage the applicable biological parents in conversations about their needs and progress in services, the safety and well-being of their children, and progress towards permanency in foster care cases.

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

Well-Being Outcome 2	Applicable Cases	Strength Rating (%)*
Item 16	19	89.5%

Item 16: Educational Needs of the Child. *Assesses whether, during the period under review, the agency made concerted efforts to assess children's educational needs at the initial contact with the child (if the case was opened during the period under review) or on an ongoing basis (if the case was opened before the period under review), and whether identified needs were appropriately addressed in case planning and case management activities.*

Seventeen (17) of the 19 applicable cases for this item were rated a Strength. The review determined the agency conducted ongoing assessments of children's educational needs through conversations with biological parents, foster parents, group home staff, school staff, and age-appropriate conversations with children. In the majority of cases, there were no educational needs identified for the child(ren). When needs were identified, the review showed that the child(ren) were already receiving services to address their educational needs and the agency was monitoring these services to ensure that their needs continued to be met and no additional services were needed.

The two (2) remaining cases were rated an Area Needing Improvement (ANI). In both of these foster care cases, the review determined that the agency was aware that the target child had educational needs but there were not services provided to address these needs during the period under review.

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

Well-Being Outcome 3	Applicable Cases	Strength Rating (%)*
Item 17	34	79.4%
Item 18	14	78.6%

Item 17: Physical Health of the Child. *Assesses whether, during the period under review, the agency addressed the physical health needs of the children, including dental health needs.*

Of the 34 applicable cases for this item, 27 were rated a Strength. In all of the cases rated a Strength, the agency conducted ongoing assessments of children's physical and dental health needs through conversations with biological parents, foster parents, group home staff, and age-appropriate conversations with or observations of children. In these cases, the agency ensured that all necessary routine physical health, dental health, and vision appointments were attended and that no follow-up services were needed. When follow-up was needed, the agency ensured these visits occurred as well.

Six (6) foster care cases were rated as an Area Needing Improvement (ANI). All of the cases that were rated an ANI were because the child was missing a necessary physical or dental health appointment. In three (3) of the cases rated an ANI the child was missing a necessary routine dental appointment during the PUR. In one (1) case the child was missing their comprehensive health exam, routine dental, and routine vision appointments, and in another (1) case the child was missing a necessary follow-up vision appointment. In one (1) case the child was referred for surgery and this surgery was not yet scheduled due to delays in having the surgery approved by administration. Additionally, the final case was an in-home case rated an ANI because the agency was unaware that the child needed to have a follow-up exam with their medical provider, therefore, this appointment did not occur.

Item 18: Mental/Behavioral Health of the Child. *Assesses whether, during the period under review, the agency addressed the mental/behavioral health needs of the children.*

Eleven (11) of the 14 applicable cases for this item were rated a Strength. In these cases, the agency conducted ongoing assessments of children's mental and behavioral needs through conversations with biological parents, foster parents, group home staff, and age-appropriate conversations with or observations of children. In the majority of these cases mental and/or behavioral health needs were identified for the children and referrals were provided for appropriate services to address these needs. In instances where services had already been provided prior to the period under review (PUR) or prior to the agency's involvement, the agency demonstrated ongoing monitoring of these services to ensure they continued to meet the identified needs. Services frequently provided to meet the mental and/or behavioral health needs of children were individual therapy, psychiatry, formal behavioral evaluations, ABA therapy, and 1:1 support services. In the two (2) foster care cases where the child was prescribed psychotropic medication, the review showed that the agency monitored the administration of these medications in accordance with state protocol.

The three (3) remaining cases were rated an Area Needing Improvement (ANI). Two (2) were foster care cases and one (1) was an in-home services case. In all three (3) of the cases rated an ANI for this item the review determined that although a referral for mental health services was made by the agency, additional referrals were not made when it was determined that the children would be on a lengthy wait list to receive services which caused a significant delay in service receipt.

V. Summary of Strengths and Areas Needing Improvement from the Onsite Review and the Practical Data Meeting

Strengths

The Practical Data meeting and onsite review highlighted several strengths that Baltimore City Department of Social Services can continue to build upon to serve children and families. The agency is strong in consistently responding to investigations and assessments in a timely manner (**Item 1**) as shown in the majority of the cases reviewed. Additionally, the agency has continued to demonstrate strong skills in assessing risk and safety for children (**Item 3**). The agency's strong practices related to timely responses to investigations and risk and safety assessment is evidenced by the positive performance in **Safety** headline indicators: *Children without maltreatment recurrence*, *Children without maltreatment after Alternative Response (AR)*, *Children without maltreatment after Family Preservation (FP)*, and *Children without maltreatment after Assessment*. Additionally, the review revealed that the agency demonstrated strong practice around providing safety-related services to prevent children's removal, when possible, specifically when substance use needs were the identified safety concern (**Item 2**). While the agency is not yet meeting the target for **Permanency** headline indicator, *Entry rate per 1,000 children*, the agency's performance is trending in the right direction and is at the lowest rate in quite a few years. Reviewed in conjunction with the safety headline indicators outcomes, children are remaining safe while remaining in their family homes. Lastly, the agency demonstrated strong skills in assessing the children's well-being (**Items 12A, 16, 17, 18**). In the majority of cases, the agency also did well in providing the appropriate services to support the children's well-being. The agency's consistent and successful assessments of children's well-being is likely supported by the frequent and quality visits the agency is having with children for both in-home and foster care cases (**Item 14**). The agency's accurate assessment of the children's educational needs, specifically, and the subsequent provision of educational services aligns with the **Well-Being** headline indicators, *initial health assessment within 5 days of entry* and *enrolled in school w/in 5 days of entry*.

Areas Needing Improvement

The Practical Data meeting and onsite review also highlighted areas that Baltimore City Department of Social Services could improve upon to strengthen its practice. Although the agency does well in assessing risk and safety for children in foster care or involved in in-home services, conducting ongoing assessments of children remaining in the family home during foster care cases is an area of growth related to **Safety** that was identified through the review process. Furthermore, increasing efforts to partner with biological parents is a significant area of improvement for the agency based upon the results of the onsite review. The review revealed that the agency did not consistently assess the needs of biological parents or provide appropriate services to address their needs (**Item 12B**). The review revealed that in many cases, the agency knew of the biological parents' whereabouts but did not make any efforts to assess their needs. Furthermore, when the agency was not aware of the biological parent's whereabouts, there was no evidence of the agency's ongoing efforts to locate the missing parent in order to engage them.

This lack of engagement with biological parents also resulted in a lack of the agency actively including parents in case planning (**Item 13**) and completing frequent, quality visits them (**Item 15**). The agency's lack of consistent engagement with biological parents aligns with the agency's performance related to permanency achievement, specifically for cases with a goal of reunification (**Item 6**). The review revealed that the majority of cases rated as an Area Needing Improvement for Item 6 had a goal of reunification, however, the agency did not make concerted efforts towards reunification during the PUR. These areas for growth are also evidenced by the agency not meeting the State target for the following **Permanency** headline indicators: *Permanency in 12 months (entries)*, *Permanency in 12 months (12-23 months)*, *Permanency in 12 months (24 months +)*, and *Re-entry from permanency*. Additionally, to further support the timely achievement of permanency, the agency should ensure that they are utilizing concurrent planning and working both goals when concurrent goals are established (**Item 5**). The review revealed that in the majority of cases rated an Area Needing Improvement for Item 5, the agency did not file for TPR or an exception to TPR when one existed.

VI. SSA Recommendations for Further Analysis and Improvement

Baltimore City DSS can utilize its strengths to drive the changes needed to improve services to children and families. We recommend the LDSS consider the following to help improve its systems and practice with children and families.

Engagement

- Focusing on improving practice around family partnership could be a key strategy in enhancing the agency's performance rate in many areas that are interconnected. Encourage agency staff and supervisors to review the Integrated Practice Model (IPM) Practice Profile for Engage(ment) found on DHS Knowledge Base. This resource can begin empowering agency staff and supervisors, through reflective prompts, to ensure they are utilizing the necessary engagement skills to build authentic partnerships with biological parents. Engagement begins at the first encounter but should be assessed and maintained throughout the life of the working relationship.
Link to Practice Profile:
http://kb.dhs.maryland.gov/directory/SSA/Integrated%20Practice%20Model/IPM%20-%20Updated/09_IPM-PS_Engage.pdf
- Utilize supervision with staff to identify any barriers or challenges to engaging biological parents on a consistent basis in order to assess their needs and identify individualized services. It may also be beneficial to conduct group case consultations around engagement with biological parents so that staff can collectively share what engagement practices have been successful with biological parents and identify common trends in barriers or challenges to engagement.
- Agency staff should increase their attempts to engage both biological parents to involve them in decision-making for their children. When agency staff has current contact information for the biological parents, conversations should be initiated around their individualized goals and challenges. When we encourage biological parents to think

about past experiences and how they've been successful, they are more likely to take ownership of the plans we collaboratively develop, which supports sustainable outcomes. If agency staff are having difficulties locating biological parents, they should utilize the Absent Parent Locator, Family Finding services, or Eligibility and Enrollment to obtain a last known address. It is also recommended to document these efforts in CJAMS.

Partnership/Permanency

- Encourage staff to work established permanency goals concurrently. Utilize case planning with families to have open dialogue and collaboration between biological parents, identified adoptive or guardianship resources, and agency staff to promote a shared understanding of the established goals and facilitate a smooth transition to achieving permanency.
- Continue to develop and strengthen community partnerships to ensure timely provision of services, such as mental health services, for children, youth, and families. If clients are waitlisted, agency staff should continue to search for alternative providers who can meet the family's needs as well as follow-up with the family and providers to ensure that clients are successfully able to access services.

VII. Next Steps

Baltimore City DSS and SSA will collaborate to review these findings in detail, reach an understanding of the local agency's strengths to sustain, and begin discussions on where to focus improvement efforts. In addition, the team will plan for how SSA technical assistance can support Baltimore City DSS to reach mutually desired outcomes. The results of this meeting will initiate the development of a Continuous Improvement Plan. SSA and the LDSS will finalize the CIP separately and include measures that facilitate monitoring progress on an ongoing basis.

Appendix A – Onsite Review Assessment of Cases

The Onsite Review Instrument (OSRI) is a federal review instrument used to collect information during the review. Its structure is organized into a Face Sheet, which is used to document general case and family information, and three sections that correspond to the outcome domains of safety, permanency, and child and family well-being. Each outcome domain is further divided into individual outcomes, which are themselves divided into individual items that relate to the outcome. Maryland uses the Children’s Bureau’s Online Monitoring System (OMS) to document each OSRI and generate reports.

Each review pair completes one OSRI per case assigned, assessing and rating items based on information and standards provided in the instrument instructions. They draw equally from two information sources to complete the instrument: documentation from the case record and case-related interviews with children, parents (this could be a legal guardian or relative depending on case specifics), foster parents, and caseworkers. There may be occasions when service providers and other professionals knowledgeable about the case will be interviewed. As the reviewers complete the instrument, item and outcome ratings are assigned and rating documentation must be provided to support those ratings.

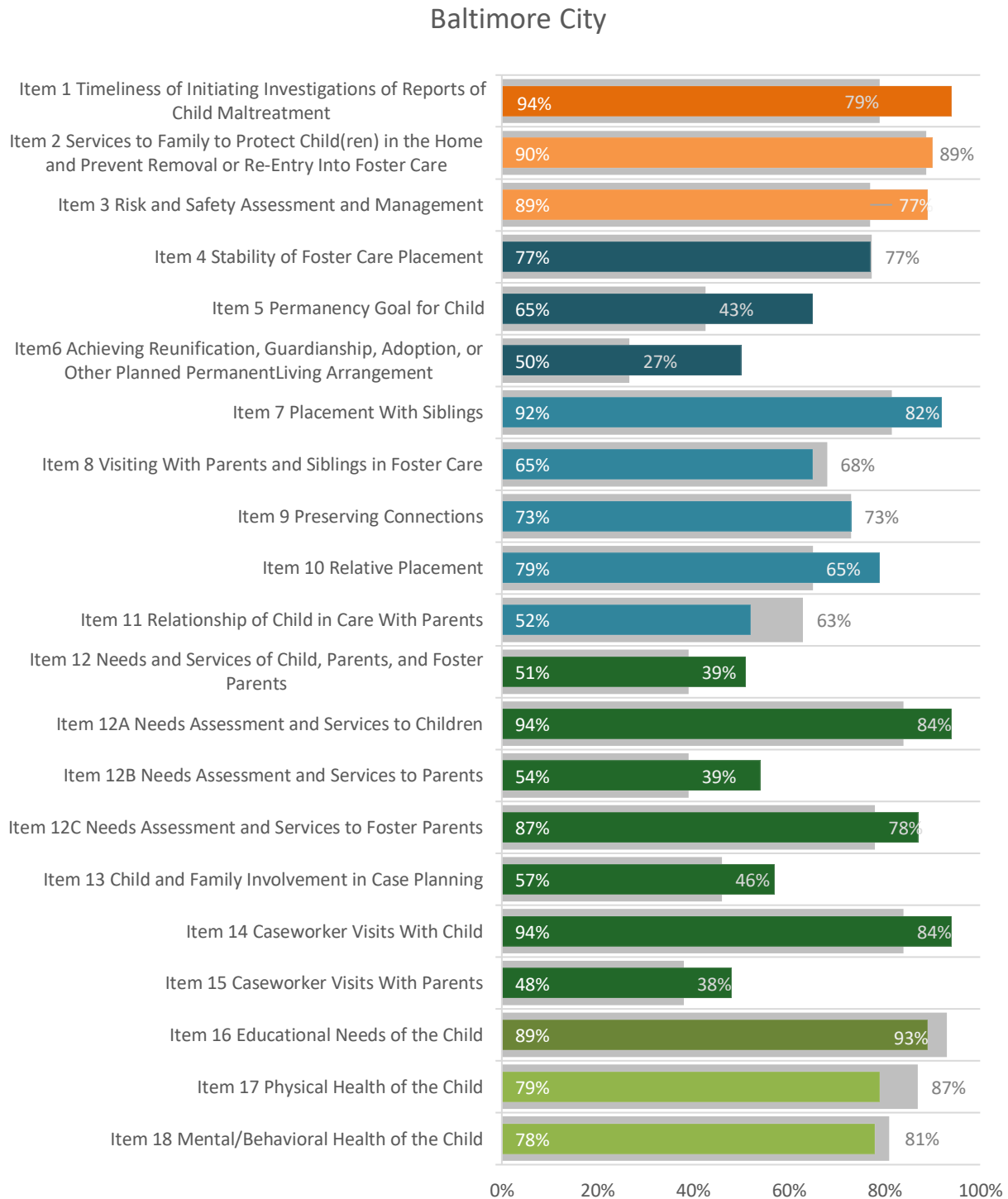
The reviewers are guided to assess practice during a defined period under review, typically a 12 to 15-month period that extends back from the date of the onsite review. The actual assessment period for any particular case depends on the length that a case is open for services, or for placement during that period under review. In general, when reviewing safety related outcomes the reviewers assess practice relative to all children in the family whether the children are served in the home or in foster care. The permanency outcomes are only relevant for a child in foster care. The assessment of well-being outcomes can vary depending on the circumstances of the case and case type.

Each case receives specific ratings for each item. Possible ratings include: Strength, Area Needing Improvement (ANI) or Not Applicable (NA). For more information on what contributes to strength ratings, including what is considered a concerted effort to achieve the desired outcome for an item, please see the CB resource [*Understanding the Federal Expectations for Achieving an OSRI Strength Rating*](#). These item ratings for a case combine to yield one of four final outcome ratings: Substantially Achieved, Partially Achieved, Not Achieved, or Not Applicable as defined in the OSRI.

In order to assure consistency and accuracy of ratings, all cases are subject to first and second level quality assurance reviews. Periodically, the Children’s Bureau conducts secondary oversight of the case before final approval.

Appendix B - Ratings for Safety, Permanency, and Well-Being Outcomes and Items

The below chart represents percent of cases rated as a strength for each item for the county compared to the Maryland data (behind in grey) from the Online Monitoring System.



Appendix C – Demographic/Context Data

Baltimore City, Demographic Data (*U.S Census Bureau, 2022*)

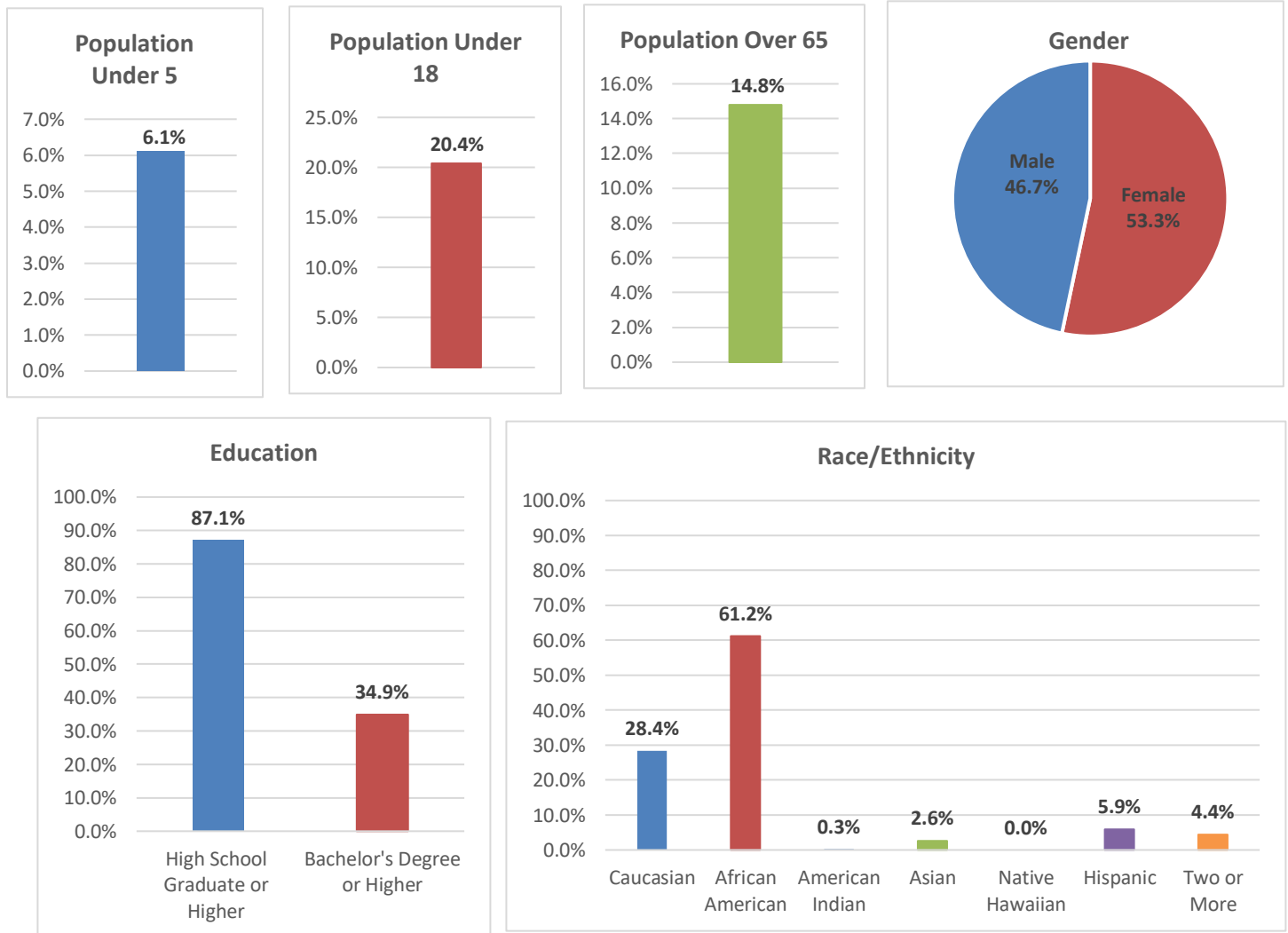
Total population (*July 1, 2022*): 569,931

Household Indicators:

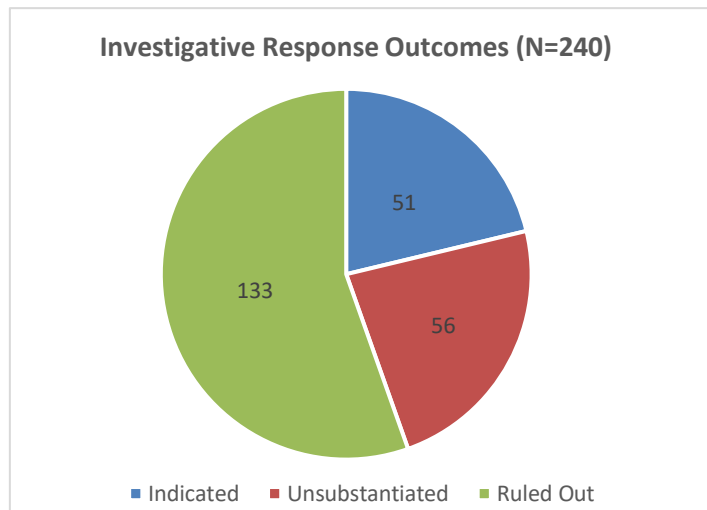
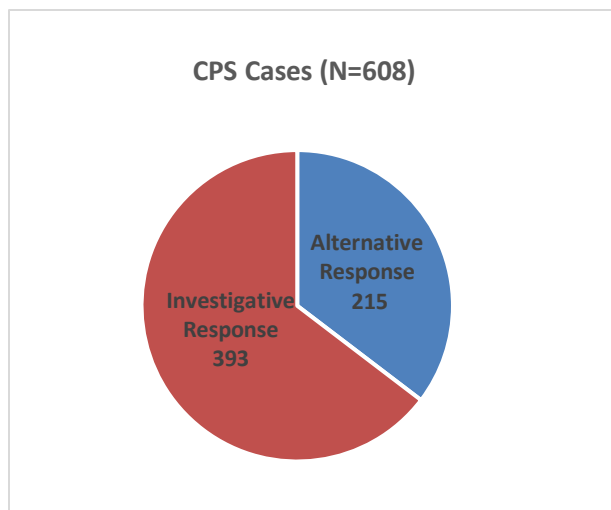
Median Income (2022 dollars) - \$58,349

Average persons per household (2018-2022) – 2.28

Poverty Rate: 19.6%



Baltimore City, Child Welfare Data (*Child Welfare Trends Report – September 2023, 12-month median end of month counts*)



Baltimore City Child Welfare Context	
*12-month median end of month counts	
CPS Maltreatment Reports	587
Total CPS Findings	238
In-Home Services	276
OOH Placements	1,484
Family Foster Homes	406
Formal Kinship Providers	431