


<b>Policy Subject:</b>	Child Fatality/Serious Physical Injury/Critical Incident
<b>Effective Date:</b>	March 1, 2022
<b>Approved By:</b>	Denise Conway, LCSW-C  Executive Director Social Services Administration
<b>Policy Number:</b>	SSA/CW #22-02
<b>Revision Date(s):</b>	Not Applicable
<b>Originating Office:</b>	Kimberley Parks-Bourn, LCSW-C Acting Director, Child Protection & Family Preservation Social Services Administration Department of Human Services
<b>Supersedes:</b>	SSA #10-05 Child Fatality/Serious Physical Injury/Critical Incident
<b>Program(s) Affected:</b>	Child Protective Services Family Preservation Services Placement & Permanency Services



## LEGAL INFORMATION & PURPOSE

This policy provides guidance on Maryland's child welfare response and notifications of Child Fatalities/Serious Physical Injuries/Critical Incidents (CF/SPI/CI). Child fatalities and serious physical injuries are the most tragic consequences of child maltreatment and require a uniform response by Maryland's child welfare staff. In addition, the Department of Human Services/Social Services Administration (DHS/SSA) and Local Departments of Social Services (LDSS) have a responsibility to ensure the safety and well-being of all children served by and committed to the LDSS.

Several State and federal statutes and regulations provide the framework for this policy. Human Services, § 1-202, Confidentiality of Information – Child abuse and neglect reports and records and § 1-203, Disclosure of Information – Child Abuse or Neglect Resulting in Death or Serious Physical Injury provide guidance on disclosure of information in certain situations. The Child Abuse Prevention and Treatment Act (CAPTA), codified as amended at 42 U.S.C. § 5101 et seq., requires States to annually submit data to the National Child Abuse and Neglect Data System (NCANDS) on child abuse and neglect to include child fatalities and maltreatment of children while in foster care. COMAR 07.02.11.23 requires SSA notification when an allegation of suspected child abuse or neglect is made involving a child in foster care.

## POLICY

This policy directive provides a framework for responding to CF/SPI/CI by clarifying the protocol for Child Protective Services (CPS), Family Preservation Services, and Placement and Permanency Services' staff, including updated practice guidance notification forms, timelines, and information about data collection. In addition, this policy addresses disclosure of information and offers guidance when responding to inquiries from the media or elected officials.

## Definitions

- A. **Cause of Death** is the disease or trauma that directly caused the victim's death.
- B. **Child Fatality (CF)** is the death of any child under 18 or any person under 21 years old who is committed to the LDSS.
- C. **Co-bedding** is the practice of a parent or other individual and a young child sleeping in the same bed or on the same sleep surface.
- D. **Contributing Factor** refers to something that helps cause a result. A contributing factor may be a caregiver's behavior or other environmental factor present in the child's family, household and/or placement and may include substance use, mental health, lack of supervision, co-bedding, etc.
- E. **Critical Incident (CI)** is defined by DHS as an incident involving a youth in care that includes an allegation of suspected child maltreatment, a foster youth on runaway, or other youth involvement in a statewide emergency (ex. an injury caused by a natural disaster or youth exposure to COVID-19, etc.).
- F. **Infant** is a child under one year old.
- G. **Media Crisis Team** is a team composed of various perspectives internal and external to the LDSS. The Team aims to develop the optimal plan for providing the media with information

about an incident.

- H. **Office of the Chief Medical Examiner (OCME)** is a department within the Maryland Department of Health that investigates cases of individuals who die in any suspicious or unusual manner.
- I. **Out-of-Home Placement** means the placement of a child into foster care, formal kinship care, group care, or residential treatment care.
- J. **Rapid Response Review Team (RRRT)** is a team that coordinates all activities at the local level when the LDSS receives the notification of a CF/SPI/CI. The Assistant Director or designee chairs the initial and any subsequent team meetings.
- K. **Serious Physical Injury (SPI)** is an injury that: creates a substantial risk of death or is a near fatality; causes permanent or protracted disfigurement; causes permanent or protracted loss of the function of any bodily member or organ; or causes permanent or protracted impairment of the function of any bodily member or organ where child abuse or neglect is suspected to be a contributing factor in the injury.
- L. **Unsafe Sleep** means placing the infant or young child in a sleep position or on a sleep surface that causes a substantial risk of physical injury to the infant or child. Examples may include co-bedding, putting the child on his or her side or stomach to sleep. Other factors may include use of soft bedding such as pillows, blankets, bumper pads, stuffed toys, and sleep positioners.

## QUICK ACCESS TO POLICY CONTENT SECTIONS

[Screening Reports of CF/SPI/CI](#)

[Notice Requirements](#)

[Investigative Response to CF/SPI/CI](#)

[Critical Incident – Alleged Maltreatment](#)

[No Suspected Maltreatment – Family Currently Receiving CW Services](#)

[No Child Maltreatment Suspected - Family Not Receiving Services](#)

[Rapid Response Review Team](#)

[Media and/or Elected Official Inquiries](#)

## **PROCEDURAL GUIDANCE**

### **I. Screening Reports of CF/SPI/CI**

1. The LDSS shall complete an Intake Report in the centralized confidential case management database documenting all reported CF/SPI/CIs.
2. The LDSS shall complete and submit the Initial Child Fatality/Serious Physical Injury/Critical Incident Report (1080A Section) regardless of whether the LDSS accepts the referral for investigation.
3. If a CF/SPI/CI is not accepted for investigation, the LDSS shall document in the 1080A Section of the form series the reason for the referral not being accepted.
4. If other child welfare services will be offered, that information shall be documented in the 1080A Section.
5. When an incident, initially reported to DHS/SSA as an SPI/CI, later results in the child's death, the LDSS shall submit updated forms and make the appropriate notifications. The LDSS shall follow procedural guidance relevant to the now fatal incident.

### **Screening Sleep-Related Fatalities/Serious Physical Injuries**

In Maryland, unsafe sleep is the primary cause of death in children under age four. Unsafe sleep that involves co-bedding and caregiver impairment is also a substantial contributing factor to other serious physical injuries or near fatalities of young children. The LDSS decision of whether to screen-in a report concerning sleep-related incidents should be based on all reported circumstances, in which it is critical to determine whether unsafe sleep arrangements created or will create a substantial risk of harm to the infant or child. The LDSS shall provide a CPS response or an assessment of all infants and young children for whom the LDSS suspects a risk of physical injury or fatality arising from unsafe sleep. As with all screening decisions, the LDSS must make its own independent decision even if law enforcement or the State's Attorney concludes that there was no "foul play" or otherwise decides not to pursue criminal charges.

### **Screening Critical Incidents**

The LDSS is responsible for determining whether any reported incident involved a child committed to a LDSS (including placed through a Voluntary Placement Agreement - VPA) and, if so, whether this is a critical incident. Examples of critical incidents are: allegations of maltreatment involving a resource parent, staff member of a facility caring for children, or household or family member while the youth is on a trial home visit, or any other caregiver alleged to have caused maltreatment such as a daycare provider or school staff. These types of Critical Incidents that involve alleged maltreatment are required to be reported to the LDSS Screening office to determine whether to screen in or screen out the information for alleged maltreatment.

Other examples of a Critical Incident include youth in foster care who have run away from placement or any other situation defined by the DHS/SSA (ex. COVID-19 exposure). The LDSS is required to notify SSA of these Critical Incidents by completing the 1080A Section of the form series. Critical Incidents not involving alleged maltreatment need not be reported to the LDSS Screening office.

## II. Notice Requirements

### **Notification Email** (2 hours)

Within two hours of the LDSS becoming aware of CF/SPI/CI (except in the case of COVID-19/other statewide emergency and runaway youth) a notification email shall be sent to the individuals below if the child was involved in an active or recently closed (within the past 12 months) child welfare case regardless of whether child abuse or neglect is suspected:

- Secretary, Department of Human Services
- Deputy Secretary of Programs
- Deputy Secretary of Operations
- Executive Director for Local Operations
- SSA Executive Director
- SSA Deputy Executive Director of Programs
- SSA Deputy Director of Operations
- Director, Office of Communications
- SSA Medical Director
- Director, CPS/Family Preservation Services
- Program Manager, CPS/Family Preservation Services
- Analyst, CPS/Family Preservation Services

In addition, if the CF/SPI or critical incident of suspected maltreatment involving a youth in care, resource home parent, or child placement agency (CPA) staff member, the email notification shall also be sent to:

- Director, Permanency Services
- Deputy Executive Director of Placement Services
- Program Manager, Permanency Services
- Program Manager, Older Youth
- Analyst, Older Youth

The email shall include:

- Child's name;
- Jurisdiction with child responsibility (if applicable), jurisdiction where the child lives and location of the incident;
- Type of case and whether the case is:
  - Active CPS, Family Preservation Services, or Foster Care
  - Any other active service
  - Closed child welfare case within the past 12 months;
- Child's gender, age, and date of birth;
- Date of CF/SPI/CI;
- Any known child welfare history with the child or family; and
- A concise narrative explaining what happened to the child, what steps the LDSS has taken thus far, and the LDSS's planned future course of action.

### **Notice Requirement for Critical Incident of Runaway or Statewide Emergency (i.e., COVID-19):**

In the case of a Critical Incident of a runaway youth in care or youth in care involved in a statewide emergency (ex. an injury caused by a natural disaster or youth exposure to COVID-19, etc.) submission of a 1080A is the only notification requirement and should be sent to the following individuals within Social Services Administration (SSA):

- Deputy Executive Director of Programs
- Director, Permanency Services
- Program Manager, Permanency Services
- Program Manager, Older Youth
- Analyst, Older Youth
- Supervisor, Permanency Services

#### **Initial Report (1080A Section) (4 business days)**

The 1080A Section shall be submitted, no later than four business days after the initial report is received, whether the allegations are screened in/screened out for CPS or other child welfare services. If the information is screened out for CPS, no other sections of the 1080 series are required to be submitted. The same individuals who received an email notification shall receive the 1080A Section. In the case of a critical incident of a runaway youth in care or youth in care involved in a statewide emergency (ex. an injury caused by a natural disaster or youth exposure to COVID-19, etc.) only the 1080A Section shall be submitted.

#### **Interim Report (1080B Section) (30 calendar days)**

The 1080B Section is to be submitted to the SSA Deputy Executive Director of Programs, CPS/Family Preservation Director, CPS/Family Preservation Program Manager, and Analyst CPS/Family Preservation within 30 calendar days after the initial report is received to report on the current status of the investigation and identify any barriers the LDSS is experiencing.

#### **Final Report (1080C Section) (60 calendar days)**

The 1080C Section shall be submitted at the conclusion of the investigation to the SSA Deputy Executive Director of Programs, CPS/Family Preservation Director, CPS/Family Preservation Program Manager, and Analyst CPS/Family Preservation.

**Note: please complete each section - 1080A, 1080B, and 1080C at the required reporting interval and submit the form series - do not separate the 1080 A-C sections for individual submission.**

### **III. Investigative Response to CF/SPI/CI**

The LDSS has several responsibilities when investigating a CF/SPI/CI. A Critical Incident warrants investigation only if it involves alleged maltreatment. In addition to determining whether maltreatment occurred and the identity of the alleged maltreater, the LDSS must also take all appropriate action to protect each child in the home or in the care of the suspected maltreater and assess the need for ongoing

services. The LDSS must make independent decisions using criteria outlined in **Sections 5-701 to 5-716 of the Family Law Article** and **COMAR 07.02.07**.

The LDSS's investigative findings are always based on different standards than those that govern the determinations made by local law enforcement or the Office of the Chief Medical Examiner (OCME). It is important to note that the LDSS must act whenever it receives a report of *suspected* child abuse or neglect and must make investigatory findings based on a preponderance of the evidence standard. In contrast, law enforcement evaluates whether to investigate if a *crime* occurred and whether the evidence establishes proof beyond a reasonable doubt. At the same time, the OCME diagnoses a cause of death based on proven medical forensic techniques.

After accepting a CF/SPI/CI the LDSS is responsible for:

- Conducting a supervisor/caseworker case conference
- Responding to the scene of the CF/SPI/CI
- Assembling the Rapid Response Review Team (*see Rapid Response Review Team section*)

### **Obtaining Collateral Information**

The LDSS shall gather information to determine events and circumstances of the incident before, during, and after the CF/SPI/CI and assess any other relevant facts about the family and child(ren). **Sources of information may include:**

- a. Emergency Medical Services (EMS), law enforcement, and any other first responder or individual at the scene of the incident or attending at the hospital;
- b. Observations about the conditions in the home or where the death occurred, the deceased child, and any statements made to first responders or law enforcement;
- c. Photos or videos, regardless of source and including surveillance camera recordings at the location where the injuries occurred;
- d. Statements and observations of all persons in the household and witnesses to the injuries (interviewed individually in accordance with established investigatory practices), which should be compared against other information received and used to assist in establishing a timeline;
- e. Child's pediatrician, schools, and any other service providers who have had interactions with the caregiver, family, and child;
- f. The physical and mental health of the child and the caregiver; and
- g. Autopsy report and any reports completed by first responders.

### **Notice Requirements**

**Initial Report (1080A Section)** (4 business days)

**Interim Report (1080B Section)** (30 calendar days)

**Final Report (1080C Section)** (60 calendar days)

#### **IV. Critical Incident – Alleged Maltreatment**

##### **Investigative Response**

During an investigation, the LDSS is required to assess the safety of all children in the home or foster care setting and assess the need for ongoing services. At no time shall the LDSS enter into a Safety Plan when a child is committed to the LDSS (see latest policy on assessing for safety). Should a child committed to the LDSS be assessed as “unsafe”, the LDSS shall immediately remove the child and make arrangements for the child's protection and care. (See COMAR 07.02.25.16.)

No additional children may be placed in or with the private or public agency, foster home, group home, shelter, or residential treatment program pending the outcome of the CPS investigation. Foster youth remaining in the placement shall be visited weekly by the appropriate LDSS staff. LDSS staff shall make a recommendation to the LDSS Director regarding the continued use of the foster care home pursuant to COMAR 07.02.25.16. The LDSS Director or designee has five business days to determine the continued use of the foster home.

##### **Responsibilities of LDSS**

- Notify the DHS Secretary and other DHS/SSA staff (within 2 hours) and, where applicable, per COMAR 07.02.07.06, 07.02.11.23, and 07.02.25.16:
  - Office of Licensing and Monitoring (OLM) if the child resides in a private agency resource home or group home, including a shelter or residential treatment program
  - Other jurisdictions' LDSS caseworkers and leadership for all other children living in the foster care setting
  - Child's attorney
  - Child's parent/guardian and attorney, unless notification is contrary to the child's best interest
  - Parent/guardian and attorney of any children living in the foster care setting at the time of the incident

##### **Notice Requirements**

**Initial Report (1080A Section)** (4 business days)

**Interim Report (1080B Section)** (30 calendar days)

**Final Report (1080C Section)** (60 calendar days)



**V. No Suspected Maltreatment – Family Currently Receiving Child Welfare Services OR Received Child Welfare Services Within Past Twelve Months**

In the case of a CF/SPI/CI where child maltreatment is not suspected of being a contributing factor in an active child welfare case, the LDSS shall provide support to the family and assess the safety of the remaining children in the household, and document the information in the Child Juvenile Adult Management System (CJAMS). If applicable, the LDSS shall notify the following parties of the incident within five business days:

- The child’s legal representative;
- The court; and
- Caseworkers for all children living in the home or foster care setting.

**Responsibilities of LDSS**

- Notify the DHS Secretary and other DHS/SSA staff by email within 2 hours of the LDSS becoming aware of the CF/SPI/CI
- Document CPS Intake Report in CJAMS

**Notice Requirements**

**Initial Report (1080A Section) (4 business days)**

**VI. No Suspected Maltreatment – Family Has Not Received Child Welfare Services Within the Past Twelve Months.**

The LDSS shall document the decision not to investigate in the 1080A Section.

**Responsibilities of LDSS**

- Notify the SSA Deputy Executive Director of Programs, CPS/Family Preservation Director, CPS/Family Preservation Program Manager, and Analyst CPS/Family Preservation within 4 business days of the LDSS becoming aware of the incident.
- Document CPS Intake Report in CJAMS

**Notice Requirements**

**Initial Report (1080A Section) (4 business days)**

**VII. REFERRALS**

The LDSS shall offer all appropriate services or assistance needed when notified of a CF/CI/SPI and, as appropriate, refer the family to supportive community services or other LDSS services to assist the

family with issues related to burial, grief, and loss.

### **VIII. RAPID RESPONSE REVIEW TEAM**

When the LDSS accepts a CF/SPI for investigation, the LDSS shall conduct a Rapid Response Review Team (RRRT) meeting, to be conducted within one business day after receiving the CF/SPI notification, to coordinate all local activities. The Assistant Director or designee will lead the RRRT. The RRRT leader is encouraged to invite all staff who have had prior contact with the family including those from another LDSS.

The RRRT meeting shall review all previous child welfare involvement/contact, arrangements for protecting other children in the home or in the care of the alleged maltreater, and planning for immediate and coordinated investigation activities. The following should be discussed and documented at the RRRT meeting:

- What did the reporter share about the injurious/fatal incident?
- How does the information reported match with what is known by the LDSS?
- Was there an open or prior case, and what was the agency's involvement?
  - What factors influenced the LDSS's previous actions?
  - What were lessons learned from previous LDSS involvement that may guide and assist with developing or updating an effective Safety Plan for the alleged victim and any other children in the family?
- Why was the other child(ren) left in or removed from the household?
- What is or was the extent of any court involvement?
- What is the extent of any police involvement?
- What is the extent of any media involvement and/or elected official inquiry?
- What is the Medical Examiner's preliminary finding, if available?

The RRRT shall, when appropriate, monitor the following:

- Timely provision of all information requested by the Communications Office as required for agency response to media inquiries;
- Timely provision of all information requested by the Government Affairs Office as required for agency response to elected official inquiries; and
- Secondary trauma support needs of staff.

As certain information may not be available at the time of the RRRT meeting, the team shall develop a clear plan of action to secure any missing information and document in the RRRT summary.

The LDSS may convene an RRRT when notified of a Critical Incident. In situations where the child was in a foster care placement, the RRRT may determine the placement status for any other child in the foster care setting at the time of the incident. If applicable, the RRRT may request the caseworker and supervisor of the resource home to participate in the meeting. If the caregiver is a CPA provider, the RRRT may request a staff member from the provider agency, SSA or OLM attend the meeting to offer support and/or information to aid in the LDSS response.

**Rapid Response Meeting** (1 business day)

The Rapid Response Review Team (RRRT) shall meet within one business day of the report. Upon review of the initial notification, DHS/SSA leadership may request an invitation to attend the RRRT meeting.

**Rapid Response Summary** (5 business days)

The RRRT meeting summary shall be uploaded to CJAMS within five business days after the meeting.

**IX. DISCLOSURE OF INFORMATION**

Section § 1-203 of the Human Services Article delineates the Department's responsibilities for the disclosure of information in child abuse or neglect cases that result in death or serious physical injury. COMAR 07.02.07.21(C)(1) also provides that the DHS Secretary, LDSS Director or their designees are authorized to disclose after consultation with the appropriate State's Attorney's Office. Specifically, each LDSS is required to complete the Disclosure of Information form (DHS/SSA 2037), providing detailed information regarding the CF/SPI within 60 days of the initial report if abuse or neglect is indicated.

The following information must be excluded from the form and/or any other documents that are being released:

- The identity and any identifying description of the person who made the report;
- The name of any child who has survived a near fatality, any sibling of the allegedly maltreated child, any parent and any other individual legally responsible for the allegedly victimized child, the alleged maltreater, and any other household or family member;
- A medical report other than a medical examiner's report regarding the cause of the fatality; and
- Any other file related to the alleged victim.

**Media and/or Elected Official Inquiries**

It is not uncommon for reports regarding child fatalities, serious physical injuries, or critical incidents to come to the attention of the media and elected officials. The DHS Communications Office and the Governor's Communications Office are the official media contacts and organizational spokespersons for DHS. The DHS Government Affairs Director is the official point of contact for any inquiries made by an elected official.

When contacted by an elected official, LDSS leadership and staff should immediately contact DHS leadership and the DHS Government Affairs Office.

When contacted by the media, staff shall immediately contact LDSS leadership, who will immediately take the following actions:

- Contact the DHS Communications Office and provide the whole inquiry, including any information available about the media outlet (reporter name, contact information, news outlet,

questions, deadline if provided).

- Reply to the reporter, acknowledging receipt of the request, thanking the reporter for reaching out, and letting the reporter know that the agency will respond as soon as possible.

After referring the media inquiry to the DHS Communications Office, DHS Communications will work with the LDSS and other DHS Divisions as needed to gather information and determine the appropriate response. DHS Communications will inform the Governor's Communications Office of media activity and elected official's inquiry as required. Staff should not allow a reporter to compel an answer to questions unless specifically authorized by DHS Communications. Each LDSS must follow the DHS Media Policy, found on Knowledge Base and available [here](#).

### **Designation of DHS Spokesperson**

DHS Communications will convey the official DHS position on issues of significance or situations that are particularly controversial or sensitive in nature. Depending on the situation, an employee outside of DHS Communications, including but not limited to LDSS leadership, may be asked to act as a spokesperson on a particular issue due to their knowledge, experience, and expertise, or questions submitted by the reporter. DHS Communications will work with the designated spokesperson to prepare them for the media response as needed.

### **Media and Elected Official Response Protocol**

The DHS Secretary and/or the DHS Director of Communications may convene a Media Crisis Team to evaluate an incident and coordinate communication. The Media Crisis Team includes the DHS Secretary (or designee), DHS Communications Director & Deputy Director, DHS Deputy Secretary for Programs, SSA Executive Director, Local Department Director, Office of the Attorney General, and RRRT Chair. Other personnel, as needed, such as the DHS Government Affairs Office, may also participate. The Media Crisis Team will designate the spokesperson for the incident. Unless designated by the DHS Communications Office, no DHS/LDSS employee should take it upon themselves to act as a spokesperson.

The Media Crisis Team shall develop a briefing document containing a summary statement of the situation and analyze the public's right to know and concerns for privacy and confidentiality. The Media Crisis Team will determine what other vital constituencies should be informed of the incident to include the need to notify the Governor's Office. The DHS Communications Director or designee, in collaboration with the Media Crisis Team, will oversee responding to press inquiries. If applicable, the Media Crisis Team will review the completed "Disclosure of Child Abuse/Neglect Information" form (DHS/SSA 2037) and may distribute the form to appropriate individuals.

## **X: SSA RESPONSIBILITIES**

### **Conduct A Centralized State-Level Review of Fatalities**

DHS/SSA shall initiate a centralized continuous quality improvement, trauma-responsive, and comprehensive Child Maltreatment Fatality Review (CMFR) process for child fatalities where

maltreatment has been determined to be a contributing factor. This centralized process is designed to understand the entire spectrum of factors that led to a child's death due to maltreatment in an effort to prevent future child deaths. The CMFR reinforces organizational values of safety culture and shifts the focus towards understanding system barriers to achieving the safest and best outcomes for children and families. Using specific triage criteria, DHS/SSA will determine what cases will be reviewed.

### **Provide Support and Resources to the LDSS**

DHS/SSA will provide reasonable assistance to the LDSS, including:

1. Technical support during any phase of the incident/investigation;
2. Participation during a case staffing or team review;
3. Assistance with identifying facilitators or providers of service for secondary trauma support;
4. When available, monetary support for secondary trauma services, initial training, and continuing education; and
5. Data upon request.

## **XI. DATA**

### **National Child Abuse and Neglect Data System (NCANDS)**

The National Child Abuse and Neglect Data System (NCANDS) requires all states to collect data regarding child fatalities. To comply with NCANDS, SSA has revised its data collection process and procedures to ensure:

1. The Local Departments of Social Services (LDSS) complete all phases of the investigation in a timely fashion;
2. Investigators have access to complete information to make accurate findings;
3. The LDSS keeps DHS/SSA apprised of the status of their investigations;
4. Information is appropriately shared with the media and the public; and
5. DHS/SSA policy and program decisions are based on data gathered about child abuse and neglect fatalities.

### **Collect, Analyze, Distribute, and Maintain Data**

The DHS/SSA will use qualitative and quantitative data on CF/SPI/CI to monitor and improve Maryland's child welfare services. This information will highlight trends across the State and in each jurisdiction. The information will be used in reports to the Maryland Legislature, community stakeholders, federal reports, the DHS Secretary, and in response to Public Information Act (PIA) requests and other requests for information.

## **XII. ALIGNMENT WITH PRACTICE MODEL**

The Integrated Practice Model (IPM) expands on SSA's foundational family-centered practice frameworks to include a clear understanding of the impact of trauma on families and the workforce. Empirical data and practice evidence inform decision-making across the continuum of care through systematic collaboration, advocating for victims, surviving children, and other family members while respecting families and empowering connections.

This policy promotes trauma-responsive interventions and a “Safety Culture” environment for individuals, families, and LDSS staff. Consistent data evaluation allows for continuous performance improvement in an outcomes-driven approach. Utilizing collaboration and engagement to honor and support individual and family connections inform family-centered decision-making regarding safety, permanency, and well-being.

## **XIII. DOCUMENTATION**

The LDSS shall document reports of all CF/SPI/CI in CJAMS along with all required forms, including completion of the DHS/SSA 1080A-C Form Series, DHS/SSA 2037, and any supplemental information including RRRT summary. LDSS should observe all policies and regulations regarding the documentation and timeliness of entering contact notes into CJAMS.

## **XIV. FORMS**

- 1080 Form Series (DHS/SSA 1080 Series A-C) (Revised FEB 2022)
- Disclosure of Information (DHS/SSA 2037) [Instructions for 2037, 2037](#)

## **XV. RELATED POLICIES**

- Child Protective Services Screening and Case Determination Process
- Failure to Report Child Abuse and Neglect
- Runaway/Missing or Abducted Children
- Alternative Response
- Investigations of Allegations of Child Abuse and Neglect in Child Care Facilities
- Screening Reports of Child and Vulnerable Adult Abuse-Neglect
- Access to Children to Conduct CPS Response or Provide Family Preservation Services

## SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

The majority of changes to this policy include re-organization and consolidation of information by type of CF/SPI/CI. Major additions to this policy revision include:

- Introduction of a Centralized State-Level Review of Fatalities process or Child Maltreatment Fatality Review (CMFR);
- Creation of a Media and Elected Official Response Protocol/Media Crisis Team/Designation of DHS Spokesperson at the State level in lieu of the local level;
- Guidance pertaining to Screening Sleep-Related Fatalities/Serious Physical Injuries;
- Obtaining Collateral Information;
- Information pertaining to Alignment with the Integrated Practice Model; and
- Information regarding the promotion of trauma-responsive interventions and a “Safety Culture” environment.

Major removals include the local level Media Response Protocol/Media Crisis Team/Spokesperson, Interagency Multi-disciplinary Team Meeting requirements, Secondary Trauma services and supports at the local level, and notifying appropriate parties of children who are under a juvenile court order but who are not in the physical custody of the LDSS. Major amendments are made to the names of Reports/Forms, how and to whom these reports are submitted, and the timeline for the DHS/SSA 1080 A-C Series (Revised January 2022).

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
Background and Purpose: Pages 2-3	<p>Combines and replaces the following sections:</p> <ul style="list-style-type: none"> <li>I. <i>Background</i> <ul style="list-style-type: none"> <li>A. <i>NCANDS requirements...</i></li> <li>B. <i>SB 529 - Child Abuse or Neglect Disclosure of Information...</i></li> </ul> </li> <li>II. <i>Purpose</i> <ul style="list-style-type: none"> <li>A. <i>This policy directive updates and clarifies...</i></li> <li>B. <i>This policy director is formatted so that...</i></li> <li>C. <i>All other sections of this policy directive apply to all situations as appropriate...</i></li> <li>D. <i>Standard Operating Procedures...</i></li> </ul> </li> </ul> <p>with the following Sections:</p> <p><b><i>LEGAL INFORMATION &amp; PURPOSE</i></b></p> <p>and</p> <p><b><i>POLICY.</i></b></p> <p>See below for content changes.</p>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
Background and Purpose: Pages 2-3	<p>Adds the following content to the newly titled Section <b>LEGAL INFORMATION &amp; PURPOSE</b>:</p> <ul style="list-style-type: none"> <li>• <i>This policy provides guidance on Maryland’s child welfare response and notifications of Child Fatalities/Serious Physical Injuries/Critical Incidents (CF/SPI/CI). Child fatalities and serious physical injuries are the most tragic consequences of child maltreatment and require a uniform response by Maryland’s child welfare staff. In addition, the Department of Human Services/Social Services Administration (DHS/SSA) and Local Departments of Social Services (LDSS) have a responsibility to ensure the safety and well-being of all children served by and committed to the LDSS.</i></li> <li>• <i>Several State and federal statutes and regulations provide the framework for this policy. Human Services, § 1-202, Confidentiality of Information – Child abuse and neglect reports and records and §1-203, Disclosure of Information – Child Abuse or Neglect Resulting in Death or Serious Physical Injury provides guidance on disclosure of information in certain situations. The Child Abuse Prevention and Treatment Act (CAPTA), codified as amended at 42 U.S.C. § 5101 et seq., requires States to annually submit data to the National Child Abuse and Neglect Data System (NCANDS) on child abuse and neglect to include child fatalities and maltreatment of children while in foster care. COMAR 07.02.11.23 requires SSA notification when an allegation of suspected child abuse or neglect is made involving a child in foster care.</i></li> </ul>
Background and Purpose: Pages 2-3	<p>Adds the following content to the newly titled Section <b>POLICY</b>:</p> <ul style="list-style-type: none"> <li>• <i>This policy directive provides a framework for responding to CF/SPI/CI by clarifying the protocol for Child Protective Services (CPS), Family Preservation Services, and Placement and Permanency Services’ staff, including updated practice guidance notification forms, timelines, and information about data collection. In addition, this policy addresses disclosure of information and offers guidance when responding to inquiries from the media or elected officials.</i></li> </ul>
Definitions: Pages 3-4	<p>Adds the following definitions:</p> <ul style="list-style-type: none"> <li>• <i>Cause of Death is the disease or trauma that directly caused the victim’s death.</i></li> <li>• <i>Child Fatality (CF) is the death of any child under 18 or any person under 21 years old who is committed to the LDSS.</i></li> </ul>



SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<ul style="list-style-type: none"> <li>● <i><b>Co-bedding</b> is the practice of a parent or other individual and a young child sleeping in the same bed or on the same sleep surface.</i></li> <li>● <i><b>Contributing Factor</b> refers to something that helps cause a result. A contributing factor may be a caregiver’s behavior or other environmental factor present in the child’s family, household and/or placement and may include substance use, mental health, lack of supervision, co-bedding, etc.</i></li> <li>● <i><b>Infant</b> is a child under one year old.</i></li> <li>● <i><b>Office of the Chief Medical Examiner (OCME)</b> is a department within the Maryland Department of Health that investigates cases of individuals who die in any suspicious or unusual manner.</i></li> <li>● <i><b>Unsafe Sleep</b> means placing the infant or young child in a sleep position or on a sleep surface that causes a substantial risk of physical injury to the infant or child. Examples may include co-bedding, putting the child on his or her side or stomach to sleep. Other factors may include use of soft bedding such as pillows, blankets, bumper pads, stuffed toys, and sleep positioners.</i></li> </ul> <p>Adds the following to the definition of Serious Physical Injury (SPI):</p> <ul style="list-style-type: none"> <li>● <i><b>or is a near fatality</b></i></li> </ul>
Definitions: Pages 3-4	<p>Replaces the following definitions with those that follow:</p> <ul style="list-style-type: none"> <li>● <i><b>Critical incident cases</b> include child abuse and neglect investigations of an event that occurred in-home or in an out-of-home placement that, for a variety of different reasons, are likely to prompt media attention with <b>Critical Incident (CI)</b> is defined by DHS as an incident involving a youth in care that includes an allegation of suspected child maltreatment, a foster youth on runaway, or other youth involvement in a statewide emergency (such as an injury caused by a natural disaster or youth exposure to COVID-19, etc.)</i></li> <li>● <i><b>Media crisis team</b> is a broad based team of individuals both internal and external to the LD with various perspectives. The purpose of the team is to assist with the development of the optimal plan for providing the media with information about the incident. In high profile situations, the team should include the local director, local communications (Public Information) officer, law enforcement/State’s Attorney, Secretary of the Department or designee, SSA Executive Director or designee, and the Director of DHR’s Office of Communication with <b>Media Crisis Team</b> is a team composed of various perspectives internal and external to the LDSS. The Team</i></li> </ul>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p><i>aims to develop the optimal plan for providing the media with information about an incident.</i></p> <ul style="list-style-type: none"> <li>● <b>Rapid Response Team</b> is a team of individuals, chaired at the assistant director for services level or above, that coordinates all activities at the local level when the LF receives notification of a Child Fatality/Serious Physical Injury/Critical Incident. This is especially important for those cases involving a family currently receiving child welfare services or that has received child welfare services within the past 12 months. The chair is responsible for convening the first and all subsequent meetings of the team with <b>Rapid Response Review Team (RRRT)</b> is a team that coordinates all activities at the local level when the LDSS receives the notification of a CF/SPI/CI. The Assistant Director or designee chairs the initial and any subsequent team meetings.</li> </ul>
Definitions: Pages 3-4	<p>Removes the following definitions:</p> <ul style="list-style-type: none"> <li>● <b>Child</b> means a person after birth until his or her 18th birthday, or any child committed to the agency that is under the age of 21</li> <li>● <b>Child and Family Services or child welfare</b> is any in-home or out-of-home service</li> <li>● <b>Child fatality/serious physical injury/critical incident (CF/SPI/CI)</b> refers to any of the situations defined below</li> <li>● <b>Fatality cases</b> include the death of any child where there is suspicion that child abuse or neglect, foul play, or inappropriate care contributed to the death of the child</li> <li>● <b>In-Home Services</b> refers to Child Protective Services Investigation, Child Protective Continuing Services (all categories) and Family Services (all categories)</li> <li>● <b>Investigation</b> refers to a child protective services investigation as defined in Maryland Family Law Section 5-706</li> <li>● <b>Review or Case Review</b> refers to a non Child Protective Services assessment during which the LD makes no determination of child abuse or neglect</li> <li>● <b>Secondary Trauma</b> is the indirect exposure to trauma through a first hand account or narrative of a traumatic event. The emotional, physical, and psychological effect of secondary trauma can threaten staff's competency and personal well-being</li> <li>● <b>Supervisory/Worker Case Conference</b> is a meeting during which the supervisor meets with the investigative worker for the purpose of guiding the investigation and determining what immediate actions will be taken to protect any surviving children and the service needs of the family</li> </ul>

**SSA-CW 10-05 and SSA-CW 22-02 Crosswalk**

<p align="center"><b>SSA-CW 10-05 Section/Page</b></p>	<p align="center"><b>Change Made to SSA-CW 22-02</b></p>
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process: Page 4</p>	<p>Renames this Section and Subsections from:</p> <p>IV. Child Fatalities/Serious Physical Injury/Critical Incident Process</p> <p>A. All CF/SPI/CI where child abuse or neglect is suspected to be a contributing factor regardless of whether the family is receiving services or has a child welfare history</p> <p>B. In a CF/SPI/CI where a family is currently receiving Child and Family Services or has had a Child and Family Services Case Closed Within the Last Twelve Months and No Child Maltreatment is suspected</p> <p>C. In a CF/SPI/CI where there is no current Child Welfare Service and No Child Welfare Cases Have Been Closed Within the Last Twelve Months and No Child Maltreatment is Suspected</p> <p>to the following:</p> <p><b>PROCEDURAL GUIDANCE</b></p> <ul style="list-style-type: none"> <li>● <b>Screening Reports of CF/SPI/CI</b></li> <li>● <b>Notice Requirements</b></li> <li>● <b>Investigative Response to CF/SPI/CI</b></li> <li>● <b>Critical Incident - Alleged Maltreatment</b></li> <li>● <b>No Suspected Maltreatment - Family Currently Receiving Services</b></li> <li>● <b>No Child Maltreatment Suspected - Family Not Receiving Services</b></li> <li>● <b>Rapid Response Review Team</b></li> <li>● <b>Media and/or Elected Official Inquiries</b></li> </ul>
<p>All CF/SPI/CI where child abuse or neglect is suspected to be a contributing factor regardless of whether the family is receiving services or has a child welfare history: Pages 4-11</p>	<p>Replaces the following list of whom the LD must notify of a CF/SPI/CI and when to notify:</p> <p><i>(a) ...notify by email the Secretary of Human Resources, the Deputy Secretary for Program, the Executive Director for SSA, the Director of Child Welfare Practice and Policy, the Director of the Office of Communications, and the Manager for In-Home Services</i></p> <p>with the following:</p> <p><b><i>Within two hours of the LDSS becoming aware of CF/SPI/CI (except in the case of COVID-19/other statewide emergency and runaway youth) a notification email shall be sent to the individuals below if the child was</i></b></p>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p><i>involved in an active or recently closed (within the past 12 months) child welfare case regardless of whether child abuse or neglect is suspected:</i></p> <p><b>II. <u>Notice Requirements</u></b></p> <ul style="list-style-type: none"> <li>● <i>Secretary, Department of Human Services</i></li> <li>● <i>Deputy Secretary of Programs</i></li> <li>● <i>Deputy Secretary of Operations</i></li> <li>● <i>Executive Director for Local Operations</i></li> <li>● <i>SSA Executive Director</i></li> <li>● <i>SSA Deputy Executive Director of Programs</i></li> <li>● <i>SSA Deputy Director of Operations</i></li> <li>● <i>Director, Office of Communications</i></li> <li>● <i>SSA Medical Director</i></li> <li>● <i>Director, CPS/Family Preservation Services</i></li> <li>● <i>Program Manager, CPS/Family Preservation Services</i></li> <li>● <i>Analyst, CPS/Family Preservation Services</i></li> </ul> <p>Adds the following language requiring additional notifications if the CF/SPI/CI involves a foster youth, resource home parent, or child placement agency (CPA) staff member:</p> <ul style="list-style-type: none"> <li>● <i>Director, Permanency Services</i></li> <li>● <i>Deputy Executive Director of Placement Services</i></li> <li>● <i>Program Manager, Permanency Services</i></li> <li>● <i>Program Manager, Older Youth</i></li> <li>● <i>Analyst, Older Youth</i></li> </ul> <p>Adds the following language:</p> <p><b>Notice Requirement for Critical Incident of Runaway or Statewide Emergency (i.e., COVID-19):</b></p> <p><i>In the case of a Critical Incident of a runaway youth in care or youth in care involved in a statewide emergency (ex. an injury caused by a natural disaster or youth exposure to COVID-19, etc.) submission of a 1080A is the <u>only</u> notification requirement and should be sent to the following individuals within Social Services Administration (SSA):</i></p> <ul style="list-style-type: none"> <li>● <i>Deputy Executive Director of Programs</i></li> <li>● <i>Director, Permanency Services</i></li> <li>● <i>Program Manager, Permanency Services</i></li> <li>● <i>Program Manager, Older Youth</i></li> <li>● <i>Analyst, Older Youth</i></li> </ul>

**SSA-CW 10-05 and SSA-CW 22-02 Crosswalk**

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<ul style="list-style-type: none"> <li>• <i>Supervisor, Permanency Services</i></li> </ul>
<p>Generate and Complete DHR/SSA Intake Worksheet (DHR/SSA 396-Attachment 1): Page 5</p>	<p>Consolidates the following Section and all relevant Subsections for each possible circumstance (alleged maltreatment; no suspected maltreatment - family currently receiving CW services; no child maltreatment suspected - family not receiving services):</p> <p style="padding-left: 40px;"><i>(b) Generate and Complete DHR/SSA Intake Worksheet (DHR/SSA 396-Attachment 1) - Immediately (within 2 hours)</i></p> <p>into the following process for all possible circumstances:</p> <p><b>I. <u>Screening Reports of CF/SPI/CI</u></b></p> <ol style="list-style-type: none"> <li><i>1. The LDSS shall complete an Intake Report in the centralized confidential case management database documenting all reported CF/SPI/CI.</i></li> <li><i>2. The LDSS shall complete and submit the Initial Child Fatality/Serious Physical Injury/Critical Incident Report (1080A Section) regardless of whether the LDSS accepts the referral for investigation.</i></li> <li><i>3. If a CF/SPI/CI is not accepted for investigation, the LDSS shall document on the 1080A Section the reason for the referral not being accepted.</i></li> <li><i>4. If other child welfare services will be offered, that information shall be documented in the 1080A Section.</i></li> <li><i>5. When an incident, initially reported to DHS/SSA as an SPI/CI, later results in the child's death, the LDSS shall submit updated forms and make the appropriate notifications. The LDSS shall follow procedural guidance relevant to the now fatal incident.</i></li> </ol>

**SSA-CW 10-05 and SSA-CW 22-02 Crosswalk**

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
<p>The LD shall complete and submit the following reports - Initial Report: Page 7</p>	<p>Removes and replaces the following Subsection:</p> <p><i>(a) The Initial Child Fatality/Serious Physical Injury/Critical Incident Report (DHR/SSA Form 1080A - Attachment 3) - Within 4 business days, the LD shall submit a CF/SPI/CI report via form 1080 A, attaching minutes from the initial Rapid Response Team meeting to the SSA In-Home Services Manager (or designee). The report should be submitted via fax or e-mail. If desired, a hard copy may be sent as a follow up to [address]. The In-Home Services Manager will disseminate the report as appropriate.</i></p> <p>with the following:</p> <p><b>Initial Report (1080A Section) (4 business days)</b></p> <p><i>The 1080A Section shall be submitted, no later than four business days after the initial report is received, whether the allegations are screened in/screened out for CPS or other child welfare services. If the information is screened out for CPS, no other sections of the 1080 series are required to be submitted. The same individuals who received an email notification shall receive the 1080A Section. In the case of a critical incident of a runaway youth in care or youth in care involved in a statewide emergency (ex. an injury caused by a natural disaster or youth exposure to COVID-19, etc.) only the 1080A Section shall be submitted.</i></p>
<p>The LD shall complete and submit the following reports - Interim Report: Page 7</p>	<p>Renames and designates the <i>Interim CF/SPI/CI Report</i> as the following: <b>Interim Report (1080B Section) (30 calendar days)</b></p> <p>Amends the required timeframe for submission of the Interim Report from <i>within 2 weeks of the incident</i> to <b>within 30 calendar days to reflect the current status of the investigation and identify any barriers the LDSS is experiencing.</b></p> <p>Amends the submission of the Interim Report from <i>submission to the In-Home Services Manager</i> to <b>the SSA Deputy Executive Director of Programs, CPS/Family Preservation Director, CPS/Family Preservation Program Manager, and Analyst CPS/Family Preservation.</b></p>
<p>The LD shall complete and submit the following reports - Follow Up Report Report: Pages 7-8</p>	<p>Renames the <i>Follow-up Child Fatality/Serious Physical Injury/Critical Incident Report/ 60 day report (DHS/SSA 1080B - Attachment 4)</i> to <b>Final Report (1080C Section) (60 calendar days).</b></p>

**SSA-CW 10-05 and SSA-CW 22-02 Crosswalk**

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p>Amends the submission of the Final Report from <i>submission to the Secretary of the Department of Human Resources and copy the SSA In-Home Services Manager (or designee) to the SSA Deputy Executive Director of Programs, CPS/Family Preservation Director, CPS/Family Preservation Program Manager, and Analyst CPS/Family Preservation.</i></p>
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process: Pages 4-20</p>	<p>Adds the following Sections and content specific to screening sleep-related CF/SPI and screening CIs:</p> <p><b><u>Screening Sleep-Related Fatalities/Serious Physical Injuries</u></b></p> <p><i>In Maryland, unsafe sleep is the primary cause of death in children under age four. Unsafe sleep that involves co-bedding and caregiver impairment is also a substantial contributing factor to other serious physical injuries or near fatalities of young children. The LDSS decision of whether to screen-in a report concerning sleep-related incidents should be based on all reported circumstances, in which it is critical to determine whether unsafe sleep arrangements created or will create a substantial risk of harm to the infant or child. The LDSS shall provide a CPS response or an assessment of all infants and young children for whom the LDSS suspects a risk of physical injury or fatality arising from unsafe sleep. As with all screening decisions, the LDSS must make its own independent decision even if law enforcement or the State’s Attorney concludes that there was no “foul play” or otherwise decides not to pursue criminal charges.</i></p> <p><b><u>Screening Critical Incidents</u></b></p> <p><i>The LDSS is responsible for determining whether any reported incident involved a child committed to a LDSS (including placed through VPA) and, if so, this is a critical incident. Examples of critical incidents are: allegations of maltreatment involving a resource parent, staff member of a facility caring for children, or household or family member while the youth is on a trial home visit, or any other caregiver alleged to have caused maltreatment such as a daycare provider or school staff. These types of Critical Incidents that involve alleged maltreatment are required to be reported to the LDSS Screening office to determine whether to screen in or screen out the information for alleged maltreatment.</i></p> <p><i>Other examples of a Critical Incident include youth in foster care who have run away from placement or any other situation defined by the DHS/SSA (ex. COVID-19 exposure). The LDSS is required to notify SSA of these Critical Incidents using the 1080A Section of the form series. Critical Incidents not involving alleged maltreatment need not be reported to the LDSS Screening office.</i></p>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process, Sections A.1.d, B.1.a, C.2-3: Pages 5-6, 13, and 20-21</p>	<p>Consolidates and revises each Section titled:</p> <p><b><i>Respond to the Scene</i></b></p> <p>into the following process for all possible circumstances:</p> <p><b>III. <u>Investigative Response to CF/SPI/CI</u></b></p> <p><i>The LDSS has several responsibilities when investigating a CF/SPI/CI (A Critical Incident warrants investigation only if it involves alleged maltreatment). In addition to determining whether maltreatment occurred and the identity of the alleged maltreater, the LDSS must also take all appropriate action to protect each child in the home or in the care of the suspected maltreater and assess the need for ongoing services. The LDSS must make independent decisions using criteria outlined in Sections 5-701 to 5-716 of the Family Law Article and COMAR 07.02.07.</i></p> <p><i>The LDSS’s investigative findings are always based on different standards than those that govern the determinations made by local law enforcement or the Office of the Chief Medical Examiner (OCME). It is important to note that the LDSS must act whenever it receives a report of suspected child abuse or neglect and must make investigatory findings based on a preponderance of the evidence standard. In contrast, law enforcement evaluates whether to investigate if a crime occurred and whether the evidence establishes proof beyond a reasonable doubt. At the same time, the OCME diagnoses a cause of death based on proven medical forensic techniques.</i></p> <p><i>After accepting a CF/SPI/CI the LDSS is responsible for:</i></p> <ul style="list-style-type: none"> <li>● <i>Conducting a supervisor/caseworker case conference</i></li> <li>● <i>Responding to the scene of the CF/SPI/CI</i></li> <li>● <i>Assembling the Rapid Response Review Team (see Rapid Response Review Team section)</i></li> </ul>
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process, Sections A.1.c and B.1.c: Pages 5 and 13</p>	<p>Consolidates both Sections titled:</p> <p><b><i>Conduct a supervisor/worker case conference</i></b></p> <p>into the following reference:</p> <p><i>After accepting a CF/SPI/CI the LDSS is responsible for:</i></p> <ul style="list-style-type: none"> <li>● <i>Conducting a supervisor/caseworker case conference</i></li> <li>● <i>Responding to the scene of the CF/SPI/CI</i></li> <li>● <i>Assembling the Rapid Response Review Team (see Rapid Response Review Team section)</i></li> </ul>



SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process, Sections A.1.e and B.1.b: Pages 6-7 and 13-15</p>	<p>Consolidates and revises all Sections titled:</p> <p><i>Assemble the Rapid Response Team</i></p> <p>into the following new Section, titled:</p> <p><b>RAPID RESPONSE REVIEW TEAM.</b></p> <p>Revisions to this content include:</p> <p>Adding:</p> <ul style="list-style-type: none"> <li>● <i>or designee</i> following the directive for the Assistant Director to lead the RRRT</li> <li>● <i>and/or any elected official inquiry</i> to the following question to be considered by the RRRT: <i>What is the extent of any media involvement and/or elected official inquiry?</i></li> <li>● <i>The RRRT shall, when appropriate, monitor the following: timely provision of all information requested by the Communications Office as required for agency response to media inquiries; or timely provision of all information requested by the Government Affairs Office as required for agency response to elected official inquiries</i></li> <li>● <i>The LDSS <u>may</u> convene an RRRT when notified of a Critical Incident.</i></li> <li>● <i>Upon review of the initial notification, DHS/SSA leadership may request an invitation to attend the RRRT meeting.</i></li> <li>● <i>The RRRT meeting summary shall be uploaded to CJAMS within five business days after the meeting.</i></li> </ul> <p>Changing:</p> <ul style="list-style-type: none"> <li>● <i>Rapid Response Team to <b>Rapid Response Review Team (RRRT)</b></i></li> <li>● <i>All individuals within the agency who have knowledge of the family should participate on the team, including both In-Home and Out-of-Home staff and supervisors. The Foster Home or Private Agency caseworker and supervisor may be included if applicable to <b>The RRRT leader is encouraged to invite all staff who have had prior contact with the family including those from another LDSS.</b></i></li> <li>● <i>...begin the local review of the case including all past case activity, plans for safety of other children if needed, determining whether to continue use of an Out of Home placement, and the need for and planning the local media response to <b>the RRRT meeting shall review all previous child welfare involvement/contact, arrangements for</b></i></li> </ul>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p><i>protecting other children in the home or in the care of the alleged maltreater, and planning for immediate and coordinated investigation activities.</i></p> <ul style="list-style-type: none"> <li><i>In cases where the child(ren) were in an out-of-home placement, the Rapid Response Team should include in the review a determination regarding any other children in the home and a recommendation regarding the continued use of the foster home pursuant to COMAR 07.02.25.15 to <b>In situations where the child was in a foster care placement, the RRRT may determine the placement status for any other child in the foster care setting at the time of the incident. If applicable, the RRRT may request the caseworker and supervisor of the resource home to participate in the meeting.</b></i></li> </ul> <p>Removes:</p> <ul style="list-style-type: none"> <li><i>Chair immediately notifies the local director of the incident</i></li> <li><i>(If the police have charged an individual relating to the incident even though child abuse or neglect is not suspected, the LD should follow the protocol of notifying the Secretary of DHR of the situation) from the following question to be considered by the RRRT: <b>What is the extent of any police involvement?</b></i></li> <li><i>What are the secondary trauma supports needs of staff? <b>and places this question in the next Section regarding information the RRRT shall monitor, when appropriate.</b></i></li> <li><i>The team is responsible for ensuring all required notifications are made and for writing the initial (within 4 business days), interim (within 2 calendar weeks of notification of the incident) and final (no more than 60 days following notification of the child incident) CF/SPI/CI reports.</i></li> </ul>
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process, Sections A.1.e.v. and B.1.vi: Pages 7 and 14-15</p>	<p>Removes the following from both Sections:</p> <p><i>Notes and any supplemental information from the Rapid Response Review shall be recorded. Information from team meetings shall be maintained and when appropriate used to prepare the required initial, interim and final fatality reports. Copies of meeting notes generated should be attached when forwarding these reports to the Local Director or designees and the SSA Executive Director</i></p> <p>and moves this information to a new Section, revised as follows:</p> <p><b>DOCUMENTATION</b></p> <p><i>The LDSS shall document reports of all CF/SPI/CI in CJAMS along with all required forms, including completion of the DHS/SSA 1080 A-C Form Series, DHS/SSA 2037, and any supplemental information including RRRT</i></p>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p><i>summary. LDSS should observe all policies and regulations regarding the documentation and timeliness of entering contact notes into CJAMS.</i></p>
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process, Sections A.2.a-g and B.3.a-g: Pages 8-9 and 16-17</p>	<p>Consolidates both Sections and all Subsections titled:</p> <p><i>The LD shall have a Media Response Protocol</i></p> <p>into a new Section and Subsections titled:</p> <p><b><u>Media and/or Elected Official Inquiries</u></b></p> <p>with Subsections <b><u>Designation of DHS Spokesperson</u></b> and <b><u>Media and Elected Official Response Protocol</u></b></p> <p>Revisions to this content include:</p> <p>Adding:</p> <ul style="list-style-type: none"> <li>● <i>DHS Communications Deputy Director</i> to the Media Crisis Team membership and <i>Other personnel, such as the DHS Government Affairs Office</i> to the list of those who may participate as needed.</li> <li>● <i>Unless designated by the DHS Communications Office, no DHS/LDSS employee should act as a spokesperson.</i></li> <li>● <i>The [State] Media Crisis Team will determine what other vital constituencies should be informed of the incident to include the need to notify the Governor’s Office.</i></li> <li>● <i>The DHS Communications Director or designee, in collaboration with the Media Crisis Team, will oversee responding to press inquiries.</i></li> <li>● <i>If applicable, the Media Crisis Team will review the completed “Disclosure of Child Abuse/Neglect Information” form (DHS/SSA 2037) and may distribute the form to appropriate individuals.</i></li> </ul> <p>Changing:</p> <ul style="list-style-type: none"> <li>● <i>The Secretary and/or the Director of Communications shall convene a Media Crisis Team to assess a CF/SPI/CI or any incident involving the maltreatment of a child that has the potential to receive media attention and begin to coordinate communication to The DHS Secretary and/or the DHS Director of Communications may convene a Media Crisis Team to evaluate an incident and coordinate communication.</i></li> <li>● <i>The Media Crisis Team shall identify a spokesperson... to DHS Communications will convey the official DHS position on issues of significance or situations that are particularly controversial or sensitive in nature. Depending on the situation, an employee outside of DHS Communications, including but not limited to LDSS leadership, may be asked to act as a spokesperson on a particular</i></li> </ul>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p><i>issue due to their knowledge, experience, and expertise, or questions submitted by the reporter. DHS Communications will work with the designated spokesperson to prepare them for the media response as needed.</i></p> <p>The remainder of this section, including Subsections e., f. and g., (pertaining to what key constituencies should be informed, if a press conference will be held or a press release issued, and consideration for Preparing Media Response) are consolidated and revised to the following:</p> <p>Adding:</p> <ul style="list-style-type: none"> <li>● <i>It is not uncommon for reports regarding child fatalities, serious physical injuries, or critical incidents to come to the attention of the media and elected officials. The DHS Communications Office and the Governor’s Communications Office are the official media contacts and organizational spokespersons for DHS. The DHS Government Affairs Director is the official point of contact for any inquiries made by an elected official.</i></li> <li>● <i>When contacted by an elected official, LDSS leadership and staff should immediately contact DHS leadership and the DHS Government Affairs Office.</i></li> <li>● <i>When contacted by the media, staff shall immediately contact LDSS leadership, who will immediately take the following actions:</i> <ul style="list-style-type: none"> <li>○ <i>Contact the DHS Communications Office and provide the whole inquiry, including information about the media outlet (reporter name, contact information, news outlet, questions, deadline (if provided)).</i></li> <li>○ <i>Reply to the reporter, acknowledging receipt of the request, thanking the reporter for reaching out, and letting the reporter know that the agency will respond as soon as possible.</i></li> </ul> </li> <li>● <i>After referring the media inquiry to the DHS Communications Office, DHS Communications will work with the LDSS and other DHS Divisions as needed to gather information and determine the media response.</i></li> <li>● <i>Staff should not allow a reporter to compel an answer to questions unless specifically authorized by DHS Communications. Each LDSS must follow the DHS Media Policy, found on Knowledge Base and accessed <a href="#">here</a>.</i></li> </ul>
Child Fatalities/Serious Physical Injury/Critical	<p>Adds two new Subsections, under the newly organized <b><u>Section III Investigative Response to CF/SPI/CI</u></b>, as follows:</p> <p><b><u>Obtaining Collateral Information</u></b></p>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
Incident Process: Pages 4-20	<p><i>The LDSS shall gather information to determine events and circumstances of the incident before, during, and after the CF/SPI/CI and assess any other relevant facts about the family and child(ren). Sources of information may include:</i></p> <ul style="list-style-type: none"> <li><i>a. Emergency Medical Services (EMS), law enforcement, and any other first responder or individual at the scene of the incident or attending at the hospital;</i></li> <li><i>b. Observations about the conditions in the home or where the death occurred, the deceased child, and any statements made to first responders or law enforcement;</i></li> <li><i>c. Photos or videos, regardless of source and including surveillance camera recordings at the location where the injuries occurred;</i></li> <li><i>d. Statements and observations of all persons in the household and witnesses to the injuries (interviewed individually in accordance with established investigatory practices), which should be compared against other information received and used to assist in establishing a timeline;</i></li> <li><i>e. Child’s pediatrician, schools, and any other service providers who have had interactions with the caregiver, family, and child;</i></li> <li><i>f. The physical and mental health of the child and the caregiver; and</i></li> <li><i>g. Autopsy report and any reports completed by first responders.</i></li> </ul>
Child Fatalities/Serious Physical Injury/Critical Incident Process, Sections A.3 and B.4: Pages 9-11 and 16-17	<p>Replaces the Sections titled <i>The LDS is Responsible for the following Notifications</i> to <b>Responsibilities of LDSS</b> (for each of the three newly organized Sections titled: Critical Incident - Alleged Maltreatment; No Suspected Maltreatment - Family Currently Receiving Child Welfare Services OR Received Child Welfare Services Within Past Twelve Months; No Suspected Maltreatment - Family Has Not Received Child Welfare Services Within the Past Twelve Months).</p> <p>New content for <u>CI - Alleged Maltreatment</u> includes:</p> <ul style="list-style-type: none"> <li>● <b>Notify the DHS Secretary and other DHS/SSA staff (within 2 hours) and, where applicable, per COMAR 07.02.07.06, 07.02.11.23, and 07.02.25.16:</b> <ul style="list-style-type: none"> <li>○ <b>Office of Licensing and Monitoring (OLM) if the child resides in a private agency resource home or group home, including a shelter or residential treatment program</b></li> <li>○ <b>Other jurisdictions’ LDSS caseworkers and leadership for all other children living in the foster care setting</b></li> <li>○ <b>Child’s attorney</b></li> <li>○ <b>Child’s parent/guardian and attorney, unless notification is contrary to the child’s best interest</b></li> </ul> </li> </ul>

**SSA-CW 10-05 and SSA-CW 22-02 Crosswalk**

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<ul style="list-style-type: none"> <li>○ <i>Parent/guardian and attorney of any children living in the foster care setting at the time of the incident</i></li> </ul> <p>New content for <u>No Suspected Maltreatment - Family Currently Receiving CW Services</u> includes:</p> <ul style="list-style-type: none"> <li>● <i>Notify the DHS Secretary and other DHS/SSA staff by email within 2 hours of the LDSS becoming aware of the CF/SPI/CI</i></li> <li>● <i>Document CPS Intake Report in CJAMS</i></li> </ul> <p>New content for <u>No Suspected Maltreatment - Family Not Receiving Services</u> includes:</p> <ul style="list-style-type: none"> <li>● <i>Notify the SSA Deputy Executive Director of Programs, CPS/Family Preservation Director, CPS/Family Preservation Program Manager, and Analyst CPS/Family Preservation within 4 business days of the LDSS becoming aware of the incident.</i></li> <li>● <i>Document CPS Intake Report in CJAMS</i></li> </ul>
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process, Notification of Appropriate Parties, Sections A.3.b-f and B.4.b-d: Pages 9-11 and 17-18</p>	<p>Replaces the Sections titled <i>Notification of Appropriate Parties when a Family is Receiving In-Home Services/Notification of appropriate parties of children in an Out-of-Home Placement (OHP) setting/Notification of appropriate parties of children who are under a juvenile court order but who are not in the physical custody of the LD</i> with new Sections for each of the possible circumstances, titled as follows:</p> <p><b><u>IV. Critical Incident - Alleged Maltreatment</u></b></p> <p><b><u>V. No Suspected Maltreatment - Family Currently Receiving Child Welfare Services OR Received Child Welfare Services Within Past Twelve Months</u></b></p> <p><b><u>VI. No Suspected Maltreatment - Family Has Not Received Child Welfare Services Within the Past Twelve Months</u></b></p>
<p>Child Fatalities/Serious Physical Injury/Critical Incident Process, Pages 4-20</p>	<p>Revisions to the content in the newly titled Section <b><u>IV. Critical Incident - Alleged Maltreatment</u></b> include:</p> <p>Adding:</p> <ul style="list-style-type: none"> <li>● <i>During an investigation, the LDSS is required to assess the safety of all children in the home or foster care setting and assess the need for ongoing services. At no time shall the LDSS enter into a Safety Plan when a child is committed to the LDSS (see latest policy on assessing for safety). Should a child committed to the LDSS be assessed as “unsafe”, the LDSS shall immediately remove the child and make arrangements for the child's protection and care. (See</i></li> </ul>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p><i>COMAR 07.02.25.16.)</i></p> <ul style="list-style-type: none"> <li><i>No additional children may be placed in or with the private or public agency, foster home, group home, shelter, or residential treatment program pending the outcome of the CPS investigation. Foster youth remaining in the placement shall be visited weekly by the appropriate LDSS staff. LDSS staff shall make a recommendation to the LDSS Director regarding the continued use of the foster care home pursuant to COMAR 07.02.25.16. The LDSS Director or designee has five business days to determine the continued use of the foster home.</i></li> </ul> <p>Revisions to the content in the newly titled Section <b><u>V. No Suspected Maltreatment - Family Currently Receiving Child Welfare Services OR Received Child Welfare Services Within Past Twelve Months</u></b> include:</p> <p>Adding:</p> <ul style="list-style-type: none"> <li><i>In the case of a CF/SPI/CI where child maltreatment is <u>not</u> suspected of being a contributing factor in an active child welfare case, the LDSS shall provide support to the family and assess the safety of the remaining children in the household, and document the information in CJAMS. If applicable, the LDSS shall notify the following parties of the incident within five business days:</i> <ul style="list-style-type: none"> <li><i>The child's legal representative;</i></li> <li><i>The court; and</i></li> <li><i>Caseworkers for all children living in the home or foster care setting.</i></li> </ul> </li> </ul> <p>Revisions to the content in the newly titled Section <b><u>VI. No Suspected Maltreatment - Family Has Not Received Child Welfare Services Within the Past Twelve Months</u></b> include:</p> <p>Adding:</p> <ul style="list-style-type: none"> <li><i>The LDSS shall document the decision not to investigate in the 1080A Section.</i></li> </ul>
Child Fatalities/ Serious Physical Injury/Critical Incident Process, Sections A.3.e. and B.4.d.: Pgs 10 and 18	Removed both Sections titled: <i>Notification of appropriate parties of children who are under a juvenile court order but who are not in the physical custody of the LD</i>
Child Fatalities/Serious Physical Injury/Critical	Amended <i>Notification of Investigative Disposition</i> (Section A.3.f.i-iv) as follows: <ul style="list-style-type: none"> <li>Moved this information to a new Section titled <b>DISCLOSURE OF INFORMATION</b></li> </ul>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
Incident Process, Section A.3.f: Page 11	<p>Adding:</p> <ul style="list-style-type: none"> <li>● <i>Section § 1-203 of the Human Services Article delineates the Department’s responsibilities for the disclosure of information in child abuse or neglect cases that result in death or physical injury.</i></li> <li>● <i>It also provides details on what the DHS Secretary, LDSS Director or designee is authorized to disclose after consultation with the appropriate State’s Attorney’s Office.</i></li> <li>● <i>The following information must be excluded from the form or any other release of information:</i> <ul style="list-style-type: none"> <li>● <i>The identity and any identifying description of the person who made the report;</i></li> <li>● <i>The name of any child who has survived a near fatality, any sibling of the allegedly maltreated child, any parent and any other individual legally responsible for the allegedly victimized child, the alleged maltreater, and any other household or family member;</i></li> <li>● <i>A medical report other than a medical examiner’s report regarding the cause of the fatality; and</i></li> <li>● <i>Any other file related to the alleged victim.</i></li> </ul> </li> </ul> <p>Changing:</p> <ul style="list-style-type: none"> <li>● <i>Upon completion of the Child Abuse/Neglect Disposition Report (DHR/SSA 181-A, M, &amp;N), the investigative worker shall place a copy of the notification in the child’s record and notify the following parties of the disposition in writing: i. the alleged maltreater; ii. child’s attorney, if applicable; iii. private child placement agency, if the alleged maltreater was an employee and the act involved a current or past resident of the agency, and; iv. SSA to <b>Specifically, each LDSS is required to complete the Disclosure of Information form (DHS/SSA 2037) providing detailed information regarding the CF/SPI within 60 days of the initial report if abuse or neglect is indicated.</b></i></li> </ul>
Notification of the Director’s Decision Concerning the Continued Use of a Facility, Sections A.3.a and B.4.a: Pages 9 and 17	Removed both Sections titled <i>Notification of the Director’s Decision Concerning the Continued Use of a Facility</i> and all content therein
Interagency Multi-disciplinary Team Meetings,	Removed both Sections and Subsections titled <i>The LD Shall Take Into Consideration</i> and <i>Interagency Multi-disciplinary Team Meetings</i> and all content therein



**SSA-CW 10-05 and SSA-CW 22-02 Crosswalk**

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
Sections A.4.a and B.5.a: Pages 11 and 18	
Child Fatalities/Serious Physical Injury/Critical Incident Process, Secondary Trauma, Sections A.4.b and B.5.b Pages 11 and 18	<p>Moved information regarding Secondary Trauma into Subsection titled <b><u>Provide Support and Resources to the LDSS</u></b> under Section <b>SSA RESPONSIBILITIES</b> and</p> <p>Removes:</p> <ul style="list-style-type: none"> <li>● <i>DHR will assist by making available resources to supplement local secondary trauma efforts. LDs should contact the In-Home Services Manager at DHR/SSA to access these resources.</i></li> <li>● <i>Staff working with clients who are primary victims of a CF/SPI/CI may experience secondary trauma. The emotional, physical, and psychological effects of secondary trauma may mirror the effects of primary trauma, and threaten staff’s competency and personal well-being. Secondary trauma may affect all levels of staff including clerks and management.</i></li> <li>● <i>Each LD shall develop policy for responses to crisis situations. Such policies should include options for how and when staff uses the Employee Assistance Program (EAP), the supports of a collegial debriefing team, and psychological assessment of a worker’s emotional or behavioral symptoms. Secondary trauma should be dealt with on an individual, unit, and agency-wide level. Building an agency’s capacity to respond to staff needs in this area is a critical and ongoing part of the Department of Human Resources’s mission. The early period after the critical incident, from 2 days to 2 weeks is the most important time frame for responding to secondary trauma. Supervisors must play a key part in facilitating the provision of personal and unit support during traumatic events</i></li> <li>● <i>LD shall implement ongoing educational and support activities to help cope with the accumulative and long-range effects of secondary traumatic stress. Efforts shall be made to discuss and implement local protocols including an annual agency wide presentation on different aspects of secondary trauma and its impact, both inside and outside of the agency, to assist in addressing secondary trauma.</i></li> </ul>
SSA Responsibilities, Section A.1. Complete a Final Report: Page 21	Removes Section A.1. titled <b><i>Complete a Final Report</i></b> and all content therein
SSA Responsibilities, Section A.2.a-d. Conduct State Level Review of Cases: Pages 21-22	<p>Replaces Section A.2. titled <b><i>Conduct State Level Review of Cases</i></b> with a new Section titled <b><u>Conduct A Centralized State-Level Review of Fatalities</u></b></p> <p>Replaces all content therein with the following:</p> <p><b><i>DHS/SSA shall initiate a centralized continuous quality improvement,</i></b></p>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p><i>trauma-responsive, and comprehensive Child Maltreatment Fatality Review (CMFR) process for child fatalities where maltreatment has been determined to be a contributing factor. This centralized process is designed to understand the entire spectrum of factors that led to a child’s death due to maltreatment in an effort to prevent future child deaths. The CMFR reinforces organizational values of safety culture and shifts the focus towards understanding system barriers to achieving the safest and best outcomes for children and families. Using specific triage criteria, DHS/SSA will determine what cases will be reviewed.</i></p>
<p>SSA Responsibilities, Section 3.a-f. Collect, Analyze, Disseminate and Maintain Data: Page 22</p>	<p>Added a new Section and Subsections titled:</p> <p><b>DATA</b></p> <p><b><u>National Child Abuse and Neglect Data System (NCANDS) and</u></b></p> <p><b><u>Collect, Analyze, Distribute, and Maintain Data</u></b></p> <p>Amends content in these Sections as follows:</p> <p>Adding:</p> <ul style="list-style-type: none"> <li>● <i>This information will highlight trends across the State and in each jurisdiction.</i></li> <li>● <i>The information will be used in reports to the Maryland Legislature, community stakeholders, federal reports, the DHS Secretary, and in response to other requests for information.</i></li> </ul> <p>Changing:</p> <ul style="list-style-type: none"> <li>● <i>Information collected from various reports, State Level Reviews, and MD CHESSIE, that reflect both qualitative and quantitative data pertaining to CF/SPI/CI shall be for purpose of directing and improving Child Welfare Services to <b>The DHS/SSA will use qualitative and quantitative data on CF/SPI/CI to monitor and improve Maryland’s child welfare services.</b></i></li> </ul> <p>Removing:</p> <ul style="list-style-type: none"> <li>● <i>An annual report shall be completed for dissemination to the Legislature, the Secretary of DHR, and other appropriate State officials and DHR staff as requested.</i></li> <li>● <i>Specialized reports shall be completed upon request of the Manager for In-Home Services at SSA.</i></li> <li>● <i>Additionally SSA will produce reports as required for State Stat, and quarterly reports for the Secretary on new child fatalities, those under review or investigation and those that are finalized.</i></li> </ul>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<p>Moves Subsection IV.A.3.c. to a the Section titled <b><u>National Child Abuse and Neglect Data System (NCANDS)</u></b>. See content changes below.</p>
<p>SSA Responsibilities, NCANDS Section 3.c.: Page 22</p>	<p>Amends <i>Data will be disseminated to The National Child Abuse and Neglect System (NCANDS), and other surveys, as deemed appropriate to <b>The National Child Abuse and Neglect Data System (NCANDS) requires all states to collect data regarding child fatalities. To comply with NCANDS, SSA has revised its data collection process and procedures to ensure:</b></i></p> <ol style="list-style-type: none"> <li><i>1. <b>The Local Departments of Social Services (LDSS) complete all phases of the investigation in a timely fashion;</b></i></li> <li><i>2. <b>Investigators have access to complete information to make accurate findings;</b></i></li> <li><i>3. <b>The LDSS keeps DHS/SSA apprised of the status of their investigations;</b></i></li> <li><i>4. <b>Information is appropriately shared with the media and the public; and</b></i></li> <li><i>5. <b>DHS/SSA policy and program decisions are based on data gathered about child abuse and neglect fatalities.</b></i></li> </ol>
<p>SSA Responsibilities, Section A.4.i-vi. Provide Support and Resources to the LD of Social Services: Page 22</p>	<p>Amends content in this Section as follows:</p> <p>Adding:</p> <ul style="list-style-type: none"> <li>● <i><b>When available, monetary support for secondary trauma services, initial training, and continuing education.</b></i></li> </ul> <p>Changing:</p> <ul style="list-style-type: none"> <li>● <i><b>The In-Home Services Staff shall be available to the Local Department of Social Services to <b>DHS/SSA will provide reasonable assistance to the LDSS</b></b></i></li> <li>● <i><b>Consultation during case staffings and/or Team Reviews to participation during a case staffing or team review</b></i></li> </ul> <p>Removing:</p> <ul style="list-style-type: none"> <li>● <i><b>assessment from technical support during any phase of the incident/investigation</b></i></li> <li>● <i><b>the CF/SPI/CI Protocol</b></i></li> </ul>
<p>NEW SECTION</p>	<p>Adds the following Section and content:</p> <p><b>REFERRALS</b></p> <p><i><b>The LDSS shall offer all appropriate services or assistance needed when notified of a CF/CI/SPI and, as appropriate, refer the family to supportive</b></i></p>

SSA-CW 10-05 and SSA-CW 22-02 Crosswalk

SSA-CW 10-05 Section/Page	Change Made to SSA-CW 22-02
	<i>community services or other LDSS services to assist the family with issues related to burial, grief, and loss.</i>
NEW SECTION	<p>Adds the following Section and content:</p> <p><b>ALIGNMENT WITH PRACTICE MODEL</b></p> <p><i>The Integrated Practice Model (IPM) expands on SSA's foundational family-centered practice frameworks to include a clear understanding of the impact of trauma on families and the workforce. Empirical data and practice evidence inform decision-making across the continuum of care through systematic collaboration, advocating for victims, surviving children, and other family members while respecting families and empowering connections.</i></p> <p><i>This policy promotes trauma-responsive interventions and a “Safety Culture” environment for individuals, families, and LDSS staff. Consistent data evaluation allows for continuous performance improvement in an outcomes-driven approach. Utilizing collaboration and engagement to honor and support individual and family connections inform family-centered decision-making regarding safety, permanency, and well-being.</i></p>
NEW SECTION	<p>Adds the following Section and content:</p> <p><b>FORMS</b></p> <ul style="list-style-type: none"> <li>• <i>1080 Form Series (DHS/SSA 1080 Series A-C) (Revised FEB 2022)</i></li> <li>• <i>Disclosure of Information (DHS/SSA 2037)</i></li> </ul> <p><b>RELATED POLICIES</b></p> <ul style="list-style-type: none"> <li>• <i>Child Protective Services Screening and Case Determination Process</i></li> <li>• <i>Failure to Report Child Abuse and Neglect</i></li> <li>• <i>Runaway/Missing or Abducted Children</i></li> <li>• <i>Alternative Response</i></li> <li>• <i>Investigations of Allegations of Child Abuse and Neglect in Child Care Facilities</i></li> <li>• <i>Screening Reports of Child and Vulnerable Adult Abuse-Neglect</i></li> <li>• <i>Access to Children to Conduct CPS Response or Provide Family Preservation Services</i></li> </ul>

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

THIS DOCUMENT CONSOLIDATES FORMS 1080A, 1080B, & 1080C - CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT. PLEASE REFER TO THE [INSTRUCTIONS](#) FOR USE BEGINNING ON PAGE 9. **PLEASE COMPLETE EACH SECTION - 1080A, 1080B AND 1080C AT THE REQUIRED REPORTING INTERVAL AND SUBMIT THE FORM SERIES - DO NOT SEPARATE THE 1080 A-C SECTIONS INTO INDIVIDUAL SUBMISSIONS.**

**1080A: INITIAL CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

**COMPLETE AND SUBMIT THIS SECTION WITHIN 4 DAYS OF LEARNING OF A CHILD FATALITY, NEAR FATALITY, OR CRITICAL INCIDENT.**

SEND THIS INFORMATION TO THE APPROPRIATE MARYLAND DEPARTMENT OF HUMAN SERVICES PARTIES AS PER DHS/SSA POLICY VIA EMAIL. WHERE LISTED, UNKNOWN IS IDENTIFIED AS UNK AND NOT APPLICABLE IS IDENTIFIED AS N/A WHERE AVAILABLE.

A. REPORT IDENTIFIER		
1. CASE TYPE (CHECK ALL THAT APPLY):		
1A. <input type="checkbox"/> CHILD FATALITY (ENTER DOD IN CJAMS)	1B. <input type="checkbox"/> NEAR-DEATH/ SERIOUS PHYSICAL INJURY	1C. <input type="checkbox"/> CRITICAL INCIDENT <input type="checkbox"/> RUNAWAY <input type="checkbox"/> PROVIDER INVOLVED MALTREATMENT <input type="checkbox"/> STATEWIDE EMERGENCY/ COVID-19
2. DATE OF THIS CF/SPI/CI REPORT:		3. COUNTY/JURISDICTION WHERE INCIDENT OCCURRED:
4. DATE WHEN THE INCIDENT OCCURRED:		5. DATE LDSS BECAME AWARE OF INCIDENT:
6. INTAKE/REFERRAL#:	6A. <input type="checkbox"/> SCREENED IN	6B. <input type="checkbox"/> SCREENED OUT (PROVIDE REASON):

B. ALLEGED VICTIM CHILD INFORMATION		
1. CHILD'S NAME (FIRST MIDDLE LAST):		
2. DATE OF BIRTH (MM/DD/YY):  <input type="checkbox"/> UNK	3. DATE OF DEATH (MM/DD/YY):  <input type="checkbox"/> UNK	4. SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

5. RACE (CHECK ALL THAT APPLY): <input type="checkbox"/> ALASKAN NATIVE <input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> ASIAN <input type="checkbox"/> WHITE/CAUCASIAN <input type="checkbox"/> BLACK/AFRICAN AMERICAN <input type="checkbox"/> LATINO <input type="checkbox"/> NATIVE HAWAIIAN/PACIFIC ISL <input type="checkbox"/> OTHER:
6. ETHNICITY: <input type="checkbox"/> HISPANIC <input type="checkbox"/> NON-HISPANIC <input type="checkbox"/> UNK

C. RUNAWAY FOSTER YOUTH ONLY		
1. DATE OF POLICE REPORT:  1A. POLICE REPORT/ COMPLAINT NUMBER:	1B. WAS A MISSING CHILD REPORT FILED WITH THE NATIONAL CENTER FOR MISSING AND EXPLOITED CHILDREN? <input type="checkbox"/> YES <input type="checkbox"/> NO	1C. WAS A PICTURE OF THE CHILD PROVIDED TO POLICE? <input type="checkbox"/> YES <input type="checkbox"/> NO
2. CHILD'S LIVING ARRANGEMENT UPDATED TO RUNAWAY IN CJAMS? <input type="checkbox"/> YES <input type="checkbox"/> NO	3. WAS THE COURT AND COUNSEL NOTIFIED? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. WAS THE PARENT/ GUARDIAN NOTIFIED? <input type="checkbox"/> YES <input type="checkbox"/> NO
5. HAVE VARIOUS COLLATERALS (IE. FRIENDS, EMPLOYER, SCHOOL STAFF, ETC.) BEEN CONTACTED? <input type="checkbox"/> YES <input type="checkbox"/> NO	6. NARRATIVE OF SITUATION:	
STOP HERE IF A RUNAWAY FOSTER YOUTH INCIDENT ONLY AND PROCEED TO SIGNATURE FIELD		

D. CRITICAL INCIDENT DUE TO COVID-19 EXPOSURE/ POSITIVE ONLY		
1. DATE OF EXPOSURE (MM/DD/YY):	1A. WAS A COVID-19 TEST CONDUCTED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	1B. TYPE OF TEST: <input type="checkbox"/> RAPID COVID-19 <input type="checkbox"/> PCR COVID-19 <input type="checkbox"/> UNK
1C. DATE OF TEST (MM/DD/YY): <input type="checkbox"/> UNK	1D. TEST RESULT: <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> INCONCLUSIVE <input type="checkbox"/> UNK	2. HOSPITALIZATION REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

<b>3. TYPE OF PLACEMENT:</b> <input type="checkbox"/> GROUP HOME <input type="checkbox"/> RESIDENTIAL TREATMENT CENTER <input type="checkbox"/> TREATMENT FOSTER CARE <input type="checkbox"/> OTHER	<b>3A. NAME OF PROVIDER:</b>  	<b>3B. NARRATIVE OF SITUATION:</b>  
--	--------------------------------------	--

**STOP HERE IF A COVID-19 EXPOSURE/ POSITIVE INCIDENT ONLY AND PROCEED TO SIGNATURE FIELD**

**E. ADDITIONAL ALLEGED VICTIM CHILD INFORMATION**

1. WAS THERE ANY OTHER OPEN CASE INVOLVING THIS CHILD AT THE TIME OF THIS INCIDENT?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. WAS THERE A CASE INVOLVING THIS CHILD CLOSED WITHIN 12 MONTHS OF THIS INCIDENT?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. WAS THE CHILD EVER PLACED OUTSIDE OF THE HOME BEFORE THE INCIDENT?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. WAS THE CHILD DIAGNOSED WITH A MENTAL OR PHYSICAL DISABILITY?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK
5. WAS THE INCIDENT RELATED TO SLEEP OR AN UNSAFE SLEEP ENVIRONMENT?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK
6. WAS THE CHILD BORN SUBSTANCE-EXPOSED (SEN)?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK
7. IN THE 72 HOURS BEFORE THE FATAL INCIDENT, WAS THE CHILD INJURED?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK
8. WAS THE CHILD’S RECORD UPDATED WITH DATE OF DEATH IN CJAMS?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK

**F. INCIDENT INFORMATION**

**F1. INCIDENT LOCATION/ALLEGED MALTREATOR INFORMATION**

<b>1. LOCATION TYPE WHERE INCIDENT OCCURRED:</b>	<input type="checkbox"/> PARENTAL HOME <input type="checkbox"/> RESIDENTIAL TREATMENT CENTER <input type="checkbox"/> OTHER (SPECIFY):	<input type="checkbox"/> RELATIVE HOME <input type="checkbox"/> LICENSED DAY CARE
--	--	--

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

2. ALLEGED MALTREATOR NAME (FIRST MIDDLE LAST):	2A. IS THIS ALSO THE CASEHEAD? <input type="checkbox"/> YES <input type="checkbox"/> NO	2B. ALIAS(ES):	
2C. DOB (MM/DD/YY) OR AGE:	2D. CJAMS PID:	2E. RELATIONSHIP TO VICTIM:	
3. ANY CHILD WELFARE HISTORY INVOLVING THIS PERSON? <input type="checkbox"/> YES <input type="checkbox"/> NO	3A. SUMMARY OF HISTORY:		
4. IS THIS LOCATION THE CHILD'S PRIMARY/MAIN RESIDENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO			
5. LIST OTHER CHILDREN IN THE HOUSEHOLD OF ALLEGED MALTREATOR (SKIP IF THIS IS A CRITICAL INCIDENT REPORT OR LICENSED RESOURCE HOME):			
NAME (FIRST/LAST)	DOB	RELATIONSHIP TO VICTIM	CJAMS PID
<b>F2. NARRATIVE OF INCIDENT:</b>			
1. PROVIDE DETAIL ON THE CIRCUMSTANCES OF THE INCIDENT AND ANY OTHER RELEVANT INFORMATION:			
2. WILL A CHILD MALTREATMENT INVESTIGATION BE CONDUCTED? <input type="checkbox"/> YES <input type="checkbox"/> NO (PROVIDE REASON):			



State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

<b>G. PARENT/ GUARDIAN INFORMATION (COMPLETE FOR PARENT/ GUARDIAN NOT PREVIOUSLY DEFINED IN SECTION F1)</b>			
<b>G1. PARENT/GUARDIAN</b>			
1. NAME (FIRST MIDDLE LAST):	1A. PARENT/ GUARDIAN ROLE: <input type="checkbox"/> CASEHEAD <input type="checkbox"/> ALLEGED MALTREATOR	1B. ALIAS(ES):	
1C. DOB (MM/DD/YY) OR AGE:	1D. CJAMS PID:	1E. RELATIONSHIP:	
2. ANY CHILD WELFARE HISTORY INVOLVING THIS PERSON? <input type="checkbox"/> YES <input type="checkbox"/> NO	2A. SUMMARY OF HISTORY:		
3. DID THE CHILD RESIDE PRIMARILY AT THIS LOCATION? <input type="checkbox"/> YES <input type="checkbox"/> NO			
4. LIST OTHER CHILDREN IN THIS HOUSEHOLD (SKIP IF THIS IS A CRITICAL INCIDENT REPORT OR LICENSED RESOURCE HOME):			
NAME (FIRST/LAST)	DOB	RELATIONSHIP TO VICTIM	CJAMS PID
<b>G2. PARENT/GUARDIAN</b>			
1. NAME (FIRST MIDDLE LAST):	1A. PARENT/ GUARDIAN ROLE: <input type="checkbox"/> CASEHEAD <input type="checkbox"/> ALLEGED MALTREATOR	1B. ALIAS(ES):	
1C. DOB (MM/DD/YY) OR AGE:	1D. CJAMS PID:	1E. RELATIONSHIP:	

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

2. ANY CHILD WELFARE HISTORY INVOLVING THIS PERSON? <input type="checkbox"/> YES <input type="checkbox"/> NO	2A. SUMMARY OF HISTORY:
---	-------------------------

3. DID THE CHILD RESIDE PRIMARILY AT THIS LOCATION?     YES     NO

4. LIST OTHER CHILDREN IN THIS HOUSEHOLD (SKIP IF THIS IS A CRITICAL INCIDENT REPORT OR LICENSED RESOURCE HOME):

NAME (FIRST/LAST)	DOB	RELATIONSHIP TO VICTIM	CJAMS PID

**H. RAPID RESPONSE REVIEW**

1. DATE LDSS HELD THE RAPID RESPONSE REVIEW:

2. ADDITIONAL RELEVANT INFORMATION, INCLUDING ANY AGENCY/ CRIMINAL HISTORY NOT PREVIOUSLY IDENTIFIED:

**I. MEDIA INFORMATION**

1. WHAT IS THE EXTENT OF ANY CURRENT OR POTENTIAL MEDIA INVOLVEMENT/ PRESS RELEASE?

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

---

<b>PERSON COMPLETING THIS REPORT:</b>	<b>DATE:</b>
<b>APPROVED BY:</b>	<b>APPROVED ON:</b>

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

---

**1080B: INTERIM CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

THE **1080B** SECTION OF THIS SERIES IS TO BE COMPLETED BY THE LDSS AND SUBMITTED TO SSA WITHIN 30 CALENDAR DAYS TO REFLECT THE CURRENT STATUS OF THE INVESTIGATION.

<b>A. STATUS UPDATE</b>	<b>1. CASE NUMBER:</b>
<b>2. PROVIDE A SUMMARY ON THE STATUS OF THE INVESTIGATION AND IDENTIFY ANY BARRIERS THE LDSS IS EXPERIENCING:</b>	
<b>B. MEDICAL INFORMATION</b>	
<b>1. WHAT IS THE MEDICAL EXAMINER’S PRELIMINARY FINDING?</b>	

<b>PERSON COMPLETING THIS REPORT:</b>	<b>DATE:</b>
<b>APPROVED BY:</b>	<b>APPROVED ON:</b>

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

**1080C: FINAL CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

**COMPLETE AND SUBMIT THIS NOTICE WITHIN SIXTY CALENDAR DAYS OF LEARNING OF A CHILD FATALITY, SERIOUS PHYSICAL INJURY, OR CRITICAL INCIDENT WHEN MALTREATMENT IS SUSPECTED. WHERE LISTED, UNKNOWN IS IDENTIFIED AS UNK AND NOT APPLICABLE IS IDENTIFIED AS N/A.**

<b>A. INVESTIGATION INFORMATION</b>		
<b>A1. INVESTIGATION</b>		
1. DOES MALTREATMENT APPEAR TO BE A CONTRIBUTING FACTOR? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		
2. IF INCIDENT OCCURRED IN A LICENSED SETTING, INDICATE ACTION TAKEN: <input type="checkbox"/> N/A <input type="checkbox"/> NO ACTION <input type="checkbox"/> LICENSE SUSPENDED <input type="checkbox"/> LICENSE REVOKED <input type="checkbox"/> INVESTIGATION ONGOING <input type="checkbox"/> OTHER (SPECIFY):		
3. LEGAL OUTCOME IN THIS INCIDENT: <input type="checkbox"/> NO CHARGES FILED <input type="checkbox"/> CHARGES PENDING <input type="checkbox"/> CHARGES FILED <input type="checkbox"/> UNK		
<b>A2. DISCLOSURE OF INFORMATION (HUM. SERVS §1-203)</b>		
1. WHAT ARE THE DISPOSITIONAL FINDINGS MADE BY THE LDSS AFTER INVESTIGATION OF THIS INCIDENT?		
<input type="checkbox"/> PHYSICAL ABUSE <input type="checkbox"/> INDICATED <input type="checkbox"/> UNSUBSTANTIATED <input type="checkbox"/> RULED OUT	<input type="checkbox"/> SEXUAL ABUSE <input type="checkbox"/> INDICATED <input type="checkbox"/> UNSUBSTANTIATED <input type="checkbox"/> RULED OUT	<input type="checkbox"/> NEGLECT <input type="checkbox"/> INDICATED <input type="checkbox"/> UNSUBSTANTIATED <input type="checkbox"/> RULED OUT
<input type="checkbox"/> MENTAL INJURY ABUSE <input type="checkbox"/> INDICATED <input type="checkbox"/> UNSUBSTANTIATED <input type="checkbox"/> RULED OUT	<input type="checkbox"/> MENTAL INJURY NEGLECT <input type="checkbox"/> INDICATED <input type="checkbox"/> UNSUBSTANTIATED <input type="checkbox"/> RULED OUT	
2. SUMMARY OF FACTS AND FINDING, INCLUDING THE EVENT DATE. IN THE CASE OF A FATALITY, ALSO LIST THE CAUSE OF DEATH REPORTED BY THE MEDICAL EXAMINER (IF KNOWN):		

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

3. ANY PRIOR ADJUDICATION AS A CHILD IN NEED OF ASSISTANCE (CINA) (SELECT CHECKBOX BELOW):

3A. THE ALLEGEDLY MALTREATED CHILD:     NO PRIOR ADJUDICATIONS     YES

3B. SIBLING OF THE ALLEGEDLY MALTREATED CHILD:     NO PRIOR ADJUDICATIONS     YES     N/A

3C. OTHER CHILD IN THE HOUSEHOLD, FAMILY, OR CARE OF THE ALLEGED MALTREATOR:     NO PRIOR ADJUDICATIONS  
 YES     N/A

**A3. RISK ASSESSMENT OF THE CHILD/ FAMILY/ CAREGIVER**

PLEASE SELECT ANY RISK FACTORS PRESENT IN THE CASE:	CHILD	FAMILY	CAREGIVER
SUBSTANCE USE/ HISTORY OF SUD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MENTAL ILLNESS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DOMESTIC VIOLENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PRENATAL EXPOSURE TO DRUGS OR ALCOHOL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NO PRENATAL CARE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HISTORY OF PREVIOUS CHILD FATALITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SIGNIFICANT MEDICAL CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LACK OF HEALTH INSURANCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER (SPECIFY):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**A4. PREVENTION INFORMATION**

1. DESCRIBE HOW THE SELECTED RISK FACTORS FROM CHART ABOVE INFLUENCED THE INCIDENT:

2. BRIEFLY DESCRIBE RECOMMENDATIONS FOR POLICY CHANGE:

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

---

3. LOCAL LESSONS LEARNED FROM A REVIEW OF ACTIONS TAKEN BEFORE AND AFTER THE INCIDENT:

**PERSON COMPLETING THIS REPORT:**

**PHONE:**

**EMAIL ADDRESS:**

**SUPERVISOR:**

**PHONE:**

**DATE:**

**LDSS DIRECTOR OR DESIGNEE:**

**PHONE:**

**DATE:**

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

---

**INSTRUCTIONS FOR USE**

**GENERAL:** THE PURPOSE OF THIS FORM SERIES IS TO REPORT TO THE SOCIAL SERVICES ADMINISTRATION (SSA) INFORMATION REGARDING CHILD FATALITIES, SERIOUS PHYSICAL INJURIES, AND CRITICAL INCIDENTS THAT HAVE OCCURRED WITHIN THE JURISDICTION OF THE LOCAL DEPARTMENT OF SOCIAL SERVICES (LDSS). LDSS SHALL ALSO USE THIS FORM FOR REPORTING YOUTH IN CARE AFFECTED BY AN EPIDEMIC, PANDEMIC, ENDEMIC, OR OUTBREAK.

**NOTE:** IT IS THE RESPONSIBILITY OF THE LDSS TO COMPLETE THIS FORM SERIES ACCURATELY, FULLY, AND TIMELY.

**1080A: INITIAL REPORT**

THE **1080A** SECTION OF THIS SERIES IS TO BE COMPLETED BY THE LDSS AND SUBMITTED TO SSA VIA EMAIL WITHIN 4 DAYS OF BEING NOTIFIED OF A CHILD FATALITY, SERIOUS PHYSICAL INJURY, OR CRITICAL INCIDENT AS PER DHS/SSA POLICY. RETAIN A COPY FOR THE FILE IN CJAMS. FOR CHILD FATALITY, ENTER THE DATE OF DEATH INTO CJAMS. WHERE LISTED, UNKNOWN IS IDENTIFIED AS 'UNK' AND NOT APPLICABLE IS IDENTIFIED AS N/A.

**A. REPORT IDENTIFIER**

THIS FIELD IS TO BE COMPLETED BY THE LDSS REGARDING THE TYPE OF INCIDENT. FOR CASE TYPE, CHECK ALL THAT APPLY TO THE NOTIFICATION. ENTER THE DATE AND JURISDICTION AS REQUESTED. ENTER THE INTAKE/REFERRAL # AS LISTED IN CJAMS IF THE LDSS SCREENED IN THE REFERRAL. IF THIS INCIDENT WAS SCREENED OUT BY THE LDSS, STATE WHY.

**B. ALLEGED VICTIM CHILD INFORMATION**

THIS FIELD IS TO BE COMPLETED BY THE LDSS REGARDING THE ALLEGED VICTIM CHILD.

ENTER DEMOGRAPHIC DATA PERTAINING TO THE ALLEGED VICTIM CHILD.

**C. RUNAWAY FOSTER YOUTH ONLY**

THIS FIELD IS TO BE COMPLETED BY THE LDSS FOR REPORTING RUNAWAY YOUTH IN CARE. RESPOND TO ALL OF THE QUESTIONS AND PROVIDE A BRIEF NARRATIVE OF THE RUNAWAY INCIDENT. WHEN REPORTING A RUNAWAY CRITICAL INCIDENT, COMPLETE 1080A FIELDS A-C AND PROCEED TO THE SIGNATURE FIELD.

**D. CRITICAL INCIDENT DUE TO COVID-19 EXPOSURE/ POSITIVE**

THIS FIELD IS TO BE COMPLETED BY THE LDSS FOR REPORTING YOUTH IN CARE AFFECTED BY AN EPIDEMIC, PANDEMIC, ENDEMIC, OR OUTBREAK. ENTER COVID-19 DATES OF EXPOSURE, TEST, AND RESULTS; INDICATE WHETHER THE CHILD WAS HOSPITALIZED AND THE TYPE OF PLACEMENT. ENTER THE NAME OF THE PROVIDER AND A NARRATIVE OF THE INCIDENT. WHEN REPORTING A COVID-19 CRITICAL INCIDENT, COMPLETE 1080A FIELDS A, B & D AND PROCEED TO THE SIGNATURE FIELD.

**E: ADDITIONAL ALLEGED VICTIM CHILD INFORMATION**

SELECT THE BEST OPTION FOR EACH QUESTION. WHERE AVAILABLE, IF UNKNOWN, SELECT OPTION UNK. NOTE ITEMS #7 AND #8 ARE RELATED TO FATAL INCIDENTS.



State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

---

**F. INCIDENT INFORMATION**

THIS FIELD IS TO BE COMPLETED BY THE LDSS REGARDING THE INCIDENT.

**F1. INCIDENT LOCATION/ALLEGED MALTREATOR INFORMATION**

THIS FIELD IS USED TO DEFINE THE INCIDENT LOCATION AND ALLEGED MALTREATOR INFORMATION.

1. SELECT THE BEST OPTION TO DESCRIBE THE LOCATION WHERE THE INCIDENT TOOK PLACE. IF THIS INCIDENT WAS THE RESULT OF COMMUNITY VIOLENCE, MOTOR VEHICLE, OR OTHER LOCATION TYPE NOT LISTED AS AN OPTION, SELECT OTHER AND DEFINE THE TYPE. SKIP QUESTIONS 2-5 IF NO MALTREATOR/ CAREGIVER.
2. ENTER THE FULL NAME OF THE ALLEGED MALTREATOR. ENTER THE ALIASES THIS PERSON MAY HAVE. SELECT WHETHER THIS PERSON IS THE CASEHEAD. ENTER THE DATE OF BIRTH (DOB) (MM/DD/YY) OR AGE, CJAMS PID, AND RELATIONSHIP TO THE VICTIM CHILD.
3. SELECT WHETHER THERE IS ANY CHILD WELFARE HISTORY INVOLVING THIS PERSON AND, IF APPLICABLE, PROVIDE A SUMMARY.
4. SELECT THE BEST OPTION FOR WHETHER THE INCIDENT TOOK PLACE AT THE CHILD'S PRIMARY RESIDENCE. THE PRIMARY OR MAIN RESIDENCE IS WHERE THEY USUALLY LIVE AND SPEND MOST OF THEIR TIME.
5. LIST OTHER CHILDREN IN THE HOUSEHOLD OF THE ALLEGED MALTREATOR. ENTER NAME, DOB, AGE, RELATIONSHIP TO VICTIM CHILD, AND CJAMS PID FOR THE CHILDREN.

**F2. NARRATIVE OF INCIDENT**

THIS FIELD IS USED TO PROVIDE DETAIL ON THE CIRCUMSTANCES OF THE INCIDENT, INCLUDING ANY OTHER RELEVANT INFORMATION. CONSIDER THE FOLLOWING QUESTIONS: WHAT WAS THE CHILD DOING? HOW DID IT HAPPEN? WHAT WAS THE QUALITY OF SUPERVISION? WAS THIS PERSON IMPAIRED (BY SUBSTANCE, ILLNESS/DISABILITY, DISTRACTED/ABSENT)? WHAT WAS THE (FATAL) INJURY?

SELECT WHETHER THE LDSS WILL CONDUCT A CHILD MALTREATMENT INVESTIGATION.

**G. PARENT/GUARDIAN INFORMATION**

THIS FIELD IS TO BE COMPLETED BY THE LDSS REGARDING THE PARENTS/ GUARDIANS OF THE VICTIM CHILD.

**G1. PARENT/ GUARDIAN**

THIS FIELD IS USED TO DEFINE THE PARENT/ GUARDIAN OF THE VICTIM CHILD (NOT PREVIOUSLY DEFINED IN F1).

1. ENTER THE FULL NAME OF THE PARENT/ GUARDIAN. SELECT, IF APPLICABLE, IF THIS PERSON IS ALSO THE CASE HEAD OR THE ALLEGED MALTREATOR. ENTER THE ALIASES THIS PERSON MAY HAVE. ENTER THE DATE OF BIRTH (DOB) (MM/DD/YY) OR AGE, CJAMS PID, AND RELATIONSHIP TO THE VICTIM CHILD.
2. SELECT WHETHER THERE IS ANY CHILD WELFARE HISTORY INVOLVING THIS PERSON AND, IF APPLICABLE, PROVIDE A SUMMARY.
3. SELECT IF THIS IS THE CHILD'S PRIMARY RESIDENCE. THE PRIMARY OR MAIN RESIDENCE IS WHERE THEY USUALLY LIVE AND SPEND MOST OF THEIR TIME.
4. LIST OTHER CHILDREN IN THE HOUSEHOLD OF THE PARENT/ GUARDIAN. ENTER NAME, DOB, AGE, RELATIONSHIP TO VICTIM CHILD, AND CJAMS PID FOR ALL THE CHILDREN.

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

---

**G2. PARENT/ GUARDIAN**

THIS FIELD IS USED TO DEFINE THE PARENT/ GUARDIAN OF THE VICTIM CHILD (NOT PREVIOUSLY DEFINED IN FIELDS E1 OR G1).

1. ENTER THE FULL NAME OF THE PARENT/ GUARDIAN. SELECT, IF APPLICABLE, IF THIS PERSON IS ALSO THE CASEHEAD OR THE ALLEGED MALTREATOR. ENTER THE ALIASES THIS PERSON MAY HAVE. ENTER THE DATE OF BIRTH (DOB) (MM/DD/YY) OR AGE, CJAMS PID, AND RELATIONSHIP TO THE VICTIM CHILD.
2. SELECT WHETHER THERE IS ANY CHILD WELFARE HISTORY INVOLVING THIS PERSON AND, IF APPLICABLE, PROVIDE A SUMMARY.
3. SELECT IF THIS IS THE CHILD'S PRIMARY RESIDENCE. THE PRIMARY OR MAIN RESIDENCE IS WHERE THEY USUALLY LIVE AND SPEND MOST OF THEIR TIME.
4. LIST OTHER CHILDREN IN THE HOUSEHOLD OF THE PARENT/ GUARDIAN. ENTER NAME, DOB, AGE, RELATIONSHIP TO VICTIM CHILD, AND CJAMS PID FOR ALL THE CHILDREN.

**H. RAPID RESPONSE REVIEW**

1. PROVIDE THE DATE LDSS HELD THE RAPID RESPONSE REVIEW.
2. DESCRIBE THE EXTENT OF ANY ADDITIONAL RELEVANT INFO, INCLUDING IF THE FAMILY HAD AGENCY/CRIMINAL HISTORY BEFORE THE CHILD'S LIFETIME:

**I. MEDIA INFORMATION**

PROVIDE A BRIEF DESCRIPTION OF ANY CURRENT OR POTENTIAL MEDIA INVOLVEMENT/ PRESS RELEASES.

**1080B: INTERIM REPORT**

THE **1080B** SECTION OF THIS SERIES IS TO BE COMPLETED BY THE LDSS AND SUBMITTED TO SSA WITHIN 30 CALENDAR DAYS TO REFLECT THE CURRENT STATUS OF THE INVESTIGATION.

**A. STATUS UPDATE**

1. PROVIDE THE CASE NUMBER.
2. THIS FIELD IS TO BE COMPLETED BY THE LDSS REGARDING THE STATUS OF THE INCIDENT. PROVIDE ANY INFORMATION RELEVANT TO THE INVESTIGATION'S FOCUS. PLEASE IDENTIFY ANY BARRIERS THE LDSS IS EXPERIENCING.

**B. MEDICAL INFORMATION**

THIS FIELD IS TO BE COMPLETED BY THE LDSS WITH THE MEDICAL EXAMINER'S PRELIMINARY FINDINGS IF KNOWN.

**1080C: FINAL REPORT**

THE **1080C** SECTION OF THIS SERIES IS TO BE COMPLETED BY THE LDSS AND SUBMITTED TO SSA AT THE CONCLUSION OF THE INVESTIGATION (WITHIN 60 CALENDAR DAYS).

State of Maryland – Department of Human Services  
**CHILD FATALITY/SERIOUS PHYSICAL INJURY/CRITICAL INCIDENT REPORT**

---

**A. INVESTIGATION INFORMATION**

THIS FIELD IS REGARDING THE MALTREATMENT INVESTIGATION ABOUT THE REPORTED INCIDENT.

**A1. INVESTIGATION**

THIS FIELD IS USED TO DISCUSS THE GENERAL OUTCOME OF THE INVESTIGATION.

1. SELECT THE BEST OPTION TO DESCRIBE WHETHER MALTREATMENT APPEARED TO BE A CONTRIBUTING FACTOR IN THIS INCIDENT.
2. SELECT THE BEST OPTION TO DEFINE THE ACTION TAKEN IF THE INCIDENT OCCURRED IN A LICENSED RESOURCE SETTING. IF NOT, SELECT N/A.
3. SELECT THE OPTION THAT BEST DEFINES ANY LEGAL OR CRIMINAL INVESTIGATION REGARDING THIS CRITICAL/ FATAL INCIDENT.

**A2. DISCLOSURE OF INFORMATION (HUM. SERVS. §1-203)**

1. SELECT THE TYPE OF MALTREATMENT INVESTIGATED AND THE FINDING. IF THE LDSS INVESTIGATED MULTIPLE TYPES, SELECT EACH TYPE AND THE CORRESPONDING FINDING WHERE APPLICABLE.
2. PROVIDE A BRIEF SUMMARY OF FACTS AND FINDING, INCLUDING THE EVENT DATE. IN THE CASE OF A FATALITY, ALSO LIST THE CAUSE OF DEATH REPORTED BY THE MEDICAL EXAMINER (IF KNOWN).
3. IF THERE WAS ANY PREVIOUS CHILD WELFARE COURT INVOLVEMENT, SELECT YES. IF NOT, SELECT THAT THERE WAS NO PRIOR ADJUDICATION FOR EACH PERSON LISTED.

**A3. RISK ASSESSMENT OF THE FAMILY**

THIS FIELD IS USED TO SELECT ANY RISK FACTORS PRESENT BEFORE, DURING OR AFTER THE INCIDENT FOR THE CHILD, FAMILY AND/ OR CAREGIVER.

**A4. PREVENTION INFORMATION**

THIS FIELD IS USED TO PROVIDE INFORMATION ON THE INCIDENT FROM A PREVENTION PERSPECTIVE.

1. DESCRIBE HOW ANY SELECTED RISK FACTORS INFLUENCED THE INCIDENT.
2. BRIEFLY DESCRIBE RECOMMENDED POLICY CHANGES THAT, IF IMPLEMENTED, WOULD IMPROVE THE AGENCY'S SERVICES TO THE FAMILY, INVESTIGATION PRACTICES, AND PARTNERSHIP WITH COMMUNITY ENTITIES AND STAFF.
3. DESCRIBE ANY LOCAL LESSONS LEARNED FROM A REVIEW OF THE ACTIONS TAKEN BEFORE AND AFTER THE INCIDENT.