

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Administration for Children and Families  
Administration on Children, Youth and Families  
Children's BCFS

**Final Report**  
**Maine Child and Family Services Review**

**October 27, 2003**

**U.S. Department of Health and Human Services**  
**Administration for Children and Families**  
**Administration on Children, Youth and Families**  
**Children's Bureau**

## **EXECUTIVE SUMMARY**

### **Final Report: Maine Child and Family Services Review**

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Maine. The CFSR was conducted the week of July 21, 2003. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the State child welfare agency – the Maine Department of Human Services, Bureau of Child and Family Services (BCFS);
- The State Data Profile, prepared by the Children’s Bureau of the U.S. Department of Health and Human Services, which provides State child welfare data for the years 1999 through 2001;
- Reviews of 50 cases at three sites (Lewiston, Portland, and Biddeford) throughout the State; and
- Interviews or focus groups (conducted at all three sites and at the State-level) with stakeholders including, but not limited to children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys.

The CFSR assesses State performance with regard to seven outcomes in the areas of safety, permanency, and well-being, and seven systemic factors. A key finding of the Maine CFSR is that the State is in substantial conformity with one of the seven outcomes. Maine achieved substantial conformity with Well-Being Outcome 2 (Children receive appropriate services to meet their educational needs) based on the CFSR finding that BCFS is effective in addressing the educational needs of children in foster care and in-home services cases.

Key concerns identified with respect to the State’s performance on the outcomes occurred for Safety Outcome 1 (Children are first and foremost protected from abuse and neglect), Permanency Outcome 1 (Children have permanency and stability in their living situations), and Well Being Outcome 1 (Families have enhanced capacity to provide for their children’s needs). With respect to Safety Outcome 1, data from the State data profile indicate that the State meets the national standards for the percentage of children who experienced a recurrence of maltreatment within 6 months and the percentage of children who were maltreated by foster parents or facility staff. In addition, the case reviews conducted during the CFSR found little evidence of maltreatment recurrence as it is measured on the case review instrument. However, the CFSR findings indicate that BCFS is not effective in responding to maltreatment reports in a timely manner, and that BCFS policy regarding response timeframes is not adequate to ensure children’s protection. Although the CFSR found considerable improvements in recent years in the agency’s response to allegations of abuse by foster parents or facility staff, it was noted that further improvement is necessary to ensure children’s safety.

The State’s performance on Permanency Outcome 1 was of particular concern in that only 22.6 percent of the cases were rated as having substantially achieved this item. In addition, the State did not meet the national standard for the percentage of children who (1) were reunified with their families within 12 months of entry into foster care; (2) achieved a finalized adoption within 24 months of entry into foster care; and (3) experienced no more than 2 placements during their first 12 months in foster care. A general finding of the case reviews and the stakeholder interviews is that BCFS is not consistently effective in: (1) ensuring children’s placement stability while in foster care; (2) establishing appropriate permanency goals in a timely manner, or (3) making diligent efforts to achieve

children's permanency goals in a timely manner. However, the State has a low percentage of children who re-enter foster care within 12 months of a previous foster care episode, as evidenced by both case reviews and the State Data Profile.

Several court-related barriers to achieving finalized adoptions in a timely manner were identified during the onsite CFSR. Stakeholders interviewed about this issue indicated that termination of parental rights petitions are being filed in a timely manner, but that there are extensive delays in scheduling a TPR hearing (which often takes 3 to 4 months) and in the agency receiving the signed court order from the District Court. Stakeholders also indicated that both the courts and BCFS tend to allow parents to have more time to achieve work toward reunification even when the prognosis for reunification is low.

Finally, only 42 percent of the cases were rated as having substantially achieved Well-Being Outcome 1, with all indicators determined to be areas in need of improvement. Of particular concern was the lack of adequate face-to-face contact between BCFS workers and the children and parents in their caseloads. Only 30 percent of the 50 applicable cases were rated as a Strength for caseworker contacts with children, and only 40 percent of the 40 applicable cases were rated as a Strength for caseworker contacts with parents.

With regard to the seven systemic factors, the State was determined to be in substantial conformity with the factors of Statewide Information System; Training; Agency Responsiveness to the Community; and Foster and Adoptive Parent Licensing, Recruitment, and Retention. The State did not achieve substantial conformity with the systemic factors of Case Review System, Quality Assurance System, or Service Array.

The findings with regard to the State's performance on the safety and permanency outcomes are presented in table 1 at the end of the Executive Summary. Findings regarding well-being outcomes are presented in table 2. Table 3 presents the State's performance relative to the national standards, and table 4 provides information pertaining to the State's substantial conformity with the seven systemic factors assessed through the CFSR.

## **I. KEY FINDINGS RELATED TO OUTCOMES**

### **Safety Outcome 1: Children are first and foremost protected from abuse and neglect**

Safety Outcome 1 incorporates two indicators. One pertains to the timeliness of initiating a response to a child maltreatment report (item 1), and the other relates to the recurrence of substantiated or indicated maltreatment for the same children (item 2).

Maine did not achieve substantial conformity with Safety Outcome 1. This determination was based on the finding that the outcome was substantially achieved in 74.0 percent of the cases reviewed, which is less than the 90 percent required for a rating of substantial conformity. Performance with regard to this outcome varied across the localities included in the onsite CFSR. The outcome was determined to be substantially achieved in 83 percent of Lewiston cases and 77 percent of Portland cases, compared to only 57 percent of Biddeford cases. However, the State Data Profile data for 2001 indicate that Maine met the national standards for (1) the

percentage of children experiencing more than one substantiated or indicated child maltreatment report within a 6-month period, and (2) the percentage of children maltreated while in foster care.

A key finding of the CFSR case reviews was that BCFS does not consistently respond to maltreatment reports in accordance with State-established timeframes. In 58 percent of the applicable cases reviewed, BCFS did not establish face-to-face contact with the child victim in a timely manner. An additional finding of the CFSR was that the State's "two-phase" process of assigning maltreatment allegations for investigation results in long periods of time before the child who is the subject of the report is actually seen by a worker, even when the timeframes are consistent with State requirements. The first "phase" begins with the time the allegation is received and ends when the allegation is assigned to a District Office for investigation. The second "phase" begins when a supervisor at the District Office assigns the report to a social worker, and ends when he or she establishes face-to-face contact with the child. Stakeholders noted that sometimes it can take up to 21 days before this process is completed, even for reports that are classified as "high risk."

The CFSR case reviews did not find frequent repeat maltreatment, as it is measured for the case review instrument (item 2). In addition the State's incidence of maltreatment recurrence (5.7%) for 2001, as reported in the State Data Profile, meets the national standard of 6.1 percent or less. However, stakeholders reported that maltreatment allegations on open cases often are handled by the ongoing caseworker rather than reported to intake for investigation. Consequently all actual instances of maltreatment recurrence may not be captured in the State's data.

### **Safety Outcome 2: Children are safely maintained in their homes when possible and appropriate**

Performance relevant to Safety Outcome 2 is assessed through two indicators. One indicator (item 3) addresses the issue of the BCFS' efforts to prevent children's removal from their homes by providing services to the families that ensure children's safety while they remain in their homes. The other indicator (item 4) pertains to the agency's effectiveness in reducing the risk of harm to children.

A key finding of the CFSR case reviews was that BCFS is not consistent in providing appropriate services to families to protect children in the home and prevent their removal, and is not consistently effective in reducing the risk of harm to children. The key concern identified pertained to inadequate assessments resulting in the delivery of services that are not appropriate to ensure the child's safety and reduce risk of harm. In particular, case reviewers reported a lack of appropriate assessments in cases in which sexual abuse was a primary or secondary reason for agency contact with the family.

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

There are six indicators incorporated into the assessment of permanency outcome 1, although not all of them are relevant for all children. The indicators pertain to the agency's effectiveness in preventing foster care re-entry (item 5), ensuring placement stability for children in foster care (item 6), and establishing appropriate permanency goals for children in foster care in a timely manner (item 7). Depending on the child's permanency goal, the remaining indicators focus on the agency's efforts to achieve permanency goals (such as reunification, guardianship, adoption, and permanent placement with relatives) in a timely manner (items 8 and 9), or whether

the agency is effective in ensuring that children who have “other planned living arrangement” as a case goal are in stable placements and adequately prepared for eventual independent living (item 10).

Maine did not achieve substantial conformity with Permanency Outcome 1. This was based on the following findings:

- The outcome was substantially achieved in 22.6 percent of the cases, which is less than the 90 percent required for a determination of substantial conformity.
- Fiscal year (FY) 2001 data reported in the State Data Profile indicate that the State did not meet the national standards for the percentage of children who (1) achieved reunification within 12 months of entry into foster care, (2) achieved a finalized adoption within 24 months of entry into foster care, or (2) experienced no more than 2 placement settings after having been in foster care for 12 months or less.

However, FY 2001 data provided in the State Data Profile indicate that the State met the national standard for the percentage of children entering foster care who were re-entering within 12 months of discharge from a prior foster care episode.

Although all localities included in the onsite CFSR performed poorly on this outcome, cases in Portland were more likely to have substantially achieved this outcome (31%) than case in Biddeford (25%) or in Lewiston (0 cases).

The case review results and the data provided in the State Data Profile suggest that BCFS is not consistently effective with regard to (1) ensuring children’s placement stability while in foster care, (2) establishing appropriate permanency goals in a timely manner, or (3) making diligent efforts to achieve children’s permanency goals in a timely manner. Both Statewide data and case review findings, however, indicate that BCFS is effective in preventing re-entry into foster care.

A key concern identified through the CFSR was that children are in foster care for too long. This was attributed to various factors including, but not limited to, the following:

- Caseworkers tend to equate stability with permanency, so that if children are in stable foster care placements, caseworkers do not attend to permanency issues.
- The goal of reunification is maintained for long periods of time (by both the courts and the agency), even when the prognosis for reunification is low.
- Many caseworkers maintain the belief that both children and parents must be “completely fixed” before permanency (either through adoption or reunification) can be achieved.

### **Permanency Outcome 2. The continuity of family relationships and connections is preserved for children.**

Permanency Outcome 2 incorporates six indicators that assess agency performance with regard to (1) placing children in foster care in close proximity to their parents and close relatives (item 11); (2) placing siblings together (item 12); (3) ensuring frequent visitation between children and their parents and siblings in foster care (item 13); (4) preserving connections of children in foster care with extended family, community, cultural heritage, religion, and schools (item 14); (5) seeking relatives as potential placement resources (item 15); and (6) promoting the relationship between children and their parents while the children are in foster care (item 16).

Performance with respect to achieving Permanency Outcome 2 varied considerably across localities included in the onsite CFSR. The outcome was determined to be substantially achieved in 75 percent of Portland cases and 62.5 percent of Biddeford cases, compared to only 29 percent of Lewiston cases.

CFSR findings indicate that the Bureau makes concerted efforts to place siblings together in foster care and to promote the parent-child relationship while children are in foster care. However, case reviewers determined that the agency is not consistent in its efforts to (1) ensure that children are placed in close proximity to their parents or communities of origin, or (2) preserve connections between children and their extended families. In addition, case reviewers found that in a majority of cases, the workers did not make concerted efforts to seek and assess relatives as placement resources, although this is required in BCFS policy.

A key concern identified with regard to this outcome pertained to visitation between children in foster care and their siblings who are also in foster care. Case reviewers determined that although BCFS makes concerted efforts to place siblings together, when they are separated, visitation often is not sufficient to meet the children's needs and ensure that their connections are maintained.

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

Well-Being Outcome 1 incorporates four indicators. One pertains to agency efforts to ensure that the service needs of children, parents, and foster parents are assessed, and that the necessary services are provided to meet identified needs (item 17). A second indicator assesses agency effectiveness with regard to actively involving parents and children (when appropriate) in the case planning process (item 18). The two remaining indicators examine the frequency and quality of caseworker contacts with the children in their caseloads (item 19) and the children's parents (item 20).

Maine did not achieve substantial conformity with Well-Being Outcome 1. This determination was based on the finding that the outcome was rated as substantially achieved in 42.0 percent of the cases reviewed, which is less than the 90 percent required for a determination of substantial conformity.

The CFSR case reviews revealed that BCFS is not consistently effective with regard to (1) assessing needs and providing services to children, parents, and foster parents (item 17), or (2) involving children and parents in case planning (item 18). The most significant concern identified, however, pertained to the lack of face-to-face contact between caseworkers and the children in their caseloads. In 70 percent of the cases, reviewers determined that the frequency and quality of worker contacts with children was not sufficient to ensure their safety or well-being. In all of these cases, contacts with children occurred less frequently than once a month, and in most cases, workers typically made contact with children once every 3 months. In addition, case reviewers determined that in a substantial percentage of cases, when workers did make contact with children, the contact did not focus on issues pertinent to case planning, service delivery, and goal attainment.

## **Well Being Outcome 2: Children receive appropriate services to meet their educational needs.**

There is only one indicator for Well-Being Outcome 2. It pertains to agency effectiveness in addressing children's educational needs (item 21). The determination of substantial conformity with this outcome is based on the CFSR finding that BCFS is effective in assessing children's educational needs and providing appropriate services to meet those needs.

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

This outcome incorporates two indicators; one assesses agency efforts to meet children's physical health needs (item 22); the other assesses agency efforts to address children's mental health needs (item 23).

Maine did not achieve substantial conformity with Well-Being Outcome 3. This determination was based on the finding that the outcome was rated as substantially achieved in 72.9 percent of the 48 applicable cases, which is less than the 90 percent required for a determination of substantial conformity.

A key CFSR finding was that BCFS is effective in meeting the children's physical health needs, but is less consistently effective in meeting children's mental health needs. A key concern identified pertained to a lack of accessibility of mental health services, resulting in children having mental health service needs that are not being addressed.

## **II. KEY FINDINGS RELATED TO SYSTEMIC FACTORS**

### **Statewide Information System**

Substantial conformity with the systemic factor of Statewide Information System is determined by whether the State is operating a statewide information system that can identify the status, demographic characteristics, location, and goals for children in foster care.

Maine achieved substantial conformity with the systemic factor of Statewide Information System. The Maine Automated Child Welfare Information System (MACWIS) meets the requirements for identifying the status, demographic characteristics, location, and placement goals for children in foster care.

### **Case Review System**

Five indicators are used to assess the State's performance with regard to the systemic factor of Case Review System. The indicators examine the development of case plans and parent involvement in that process (item 25), the consistency of 6-month case reviews (item 26) and 12-month permanency hearings (item 27), the implementation of procedures to seek termination of parental rights (TPR) in accordance with the timeframes established in the Adoption and Safe Families Act (ASFA) (item 28), and the notification and inclusion of foster and pre-adoptive parents and relative caregivers in case reviews and hearings (item 29).

Maine is not in substantial conformity with the systemic factor of Case Review System. Both case reviews and stakeholder interview information indicate that caseplans are not routinely developed in collaboration with parents. In addition, the CFSR found that, although there is a process in place for holding permanency hearings as required, the effectiveness of the hearings is insufficient to promote the timely achievement of permanency for children in foster care. Similarly, although procedures are in place to pursue termination of parental rights (TPR) for children in foster care in accordance with the provisions of ASFA, there are many barriers to the effective operation of these procedures resulting in frequent delays in achieving TPR. Finally, information from stakeholder interviews indicates that (1) the State is not consistent with regard to the notification of foster parents, preadoptive parents, and relative caregivers regarding reviews or hearings; and (2) the courts are not consistent in ensuring opportunities for these caretakers to provide input into the reviews or hearings.

Despite these concerns, the CFSR found that the State is effective in ensuring that the status of each child in foster care is reviewed at least once every 6 months, either through an administrative review process or by the courts.

### **Quality Assurance System**

The State's performance with regard to the systemic factor of Quality Assurance System is based on whether the State has developed standards to ensure the safety and health of children in foster care (item 30), and whether the State is operating a statewide quality assurance system that evaluates the quality and effectiveness of services and measures program strengths and areas needing improvement (item 31).

Maine is not in substantial conformity with the systemic factor of Quality Assurance System. The key concern identified during the CFSR pertained to the agency's inconsistency in responding to maltreatment reports in a timely manner, particularly reports of child maltreatment by foster parents or facility staff. The CFSR found that, although BCFS has made improvements in recent years in the timeliness of response to maltreatment reports, there is a need for additional strengthening of this program area. Despite this concern, the CFSR found that BCFS operates an identifiable quality assurance system that is used for agency self-monitoring.

### **Training**

The systemic factor of Training incorporates an assessment of the State's new worker training program (item 32), ongoing training efforts for child welfare agency staff (item 33), and training for foster and adoptive parents (item 34).

Maine achieved substantial conformity with the systemic factor of Training. The CFSR found that BCFS requires and supports ongoing training for staff through the provision of extensive training opportunities in collaboration with the Child Welfare Training Institute, and requires and supports pre-service and ongoing training for foster and adoptive parents and other caretakers through a variety of traditional and innovative methods. However, the CFSR also found that, although the State has established a pre-service training program for all new staff, the training does not adequately prepare new social workers to perform basic aspects of their jobs.



## **Service Array**

The assessment of the systemic factor of Service Array addresses three questions: (1) Does the State have in place an array of services that meet the needs of children and families served by the child welfare agency (item 35)? (2) Are these services accessible to families and children throughout the State (item 36)? And (3) Can services be individualized to meet the unique needs of the children and family served by the child welfare agency (item 37)?

Maine did not achieve substantial conformity with the systemic factor of Service Array. The CFSR found that although a wide array of services are available, there are service gaps in key areas that affect the achievement of permanency and well being for children. In addition, accessibility to services varies by geography and the willingness of providers (physical, dental, and mental health providers) to accept Medicaid payments. Also, long waiting lists for some service impede the timely delivery of services to parents and children.

Despite these concerns, CFSR findings indicate that BCFS provides social workers with the ability to individualize services to families, and that many social workers make concerted efforts to meet the unique needs of children and families within the limits of existing services.

## **Agency Responsiveness to the Community**

The systemic factor of Agency Responsiveness to the Community incorporates the extent of the State's consultation with external stakeholders in developing the Child and Family Services Plan (items 38 and 39), and the extent to which the State coordinates child welfare services with services or benefits of other Federal or federally assisted programs serving the same population (item 40).

Maine is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. CFSR findings indicate that BCFS has been effective in its efforts to engage in consultation with major stakeholders in implementing the goals and objectives of the Child and Family Services Plan. However, the CFSR determined that greater efforts are needed to engage in more comprehensive consultation on the development and revisions of this plan, particularly with all of the Native American Tribes in the State. The CFSR also found that BCFS is effective in coordinating services with other Federal or federally-assisted programs serving the same population.

## **Foster and Adoptive Parent Licensing, Recruitment, and Retention**

The assessment of this systemic factor focuses on the State's standards for foster homes and child care institutions (items 41 and 42), the State's compliance with Federal requirements for criminal background checks for foster and adoptive parents (item 43), the State's efforts to recruit foster and adoptive parents that reflect the ethnic and racial diversity of foster children (item 44), and the State's activities with regard to using cross-jurisdictional resources to facilitate permanent placements for waiting children (item 45).

Maine is in substantial conformity with this systemic factor. Key CFSR findings were that:

- The State has developed and implemented standards for alternative care providers in accord with recommended national standards.

- The standards are applied to all licensed or approved foster family homes or child care institutions receiving IV-E or IVB funds.
- Criminal background clearances are required for foster and adoptive applicants by policy and routinely accomplished in a timely manner according to stakeholders.
- The State has implemented numerous efforts to recruit foster and adoptive homes, although there is still a need to recruit homes that can meet the needs of the small number of children in foster care who are from Native American and African American backgrounds.

**Table 1. CFSR Ratings for Safety and Permanency Outcomes and Items for Maine**

Outcomes and Indicators	Outcome Ratings			Item Ratings		
	<i>In Substantial Conformity?</i>	<i>Percent Substantially Achieved*</i>	<i>Met National Standards?</i>	<i>Rating**</i>	<i>Percent Strength</i>	<i>Met National Standards</i>
Safety Outcome 1-Children are first and foremost, protected from abuse and neglect	No	72.9	both met			
Item 1: Timeliness of investigations				ANI	42	
Item 2: Repeat maltreatment				Strength	94	Yes
Safety Outcome 2 - Children are safely maintained in their homes when possible and appropriate	No	75.5				
Item 3: Services to prevent removal				ANI	70	
Item 4: Risk of harm				ANI	80	
Permanency Outcome 1- Children have permanency and stability in their living situations	No	22.6	1 met, 3 not met			
Item 5: Foster care re-entry				Strength	100	Yes
Item 6: Stability of foster care placements				ANI	65	No
Item 7: Permanency goal for child				ANI	48	
Item 8: Reunification, guardianship and placement with relatives				ANI	44	No
Item 9: Adoption				ANI	14	No
Item 10: Other planned living arrangement				ANI	37.5	
Permanency Outcome 2 - The continuity of family relationships and connections is preserved	No	61.3				
Item 11: Proximity of placement				ANI	80	
Item 12: Placement with siblings				Strength	90	
Item 13: Visiting with parents and siblings in foster care				ANI	68	
Item 14: Preserving connections				ANI	63	
Item 15: Relative placement				ANI	45	
Item 16: Relationship of child in care with parents				Strength	85	

\*90 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

\*\*Items may be rated as a Strength or an Area Needing Improvement (ANI)

**Table 2. CFSR Ratings for Well-Being Outcomes and Items for Maine**

<b>Outcomes and Indicators</b>	<b>Outcome Ratings</b>		<b>Item Ratings</b>			
	<i><b>In Substantial Conformity?</b></i>	<i><b>Percent Substantially Achieved*</b></i>	<i><b>Met National Standards</b></i>	<i><b>Rating**</b></i>	<i><b>Percent Strength</b></i>	<i><b>Met National Standards</b></i>
Well Being Outcome 1 – Families have enhanced capacity to provide for children's needs	No	42.0				
Item 17: Needs/services of child, parents, and foster parents				ANI	66	
Item 18: Child/family involvement in case planning				ANI	57	
Item 19: Worker visits with child				ANI	30	
Item 20: Worker visits with parents				ANI	40	
Well Being Outcome 2 – Children receive services to meet their educational needs	Yes	89.5				
Item 21: Educational needs of child				Strength	89	
Well Being Outcome 3 – Children receive services to meet their physical and mental health needs are met	No	72.9				
Item 22: Physical health of child				Strength	85	
Item 23: Mental health of child				ANI	73	

\*90 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

\*\*Items may be rated as a Strength or an Area Needing Improvement (ANI)

**Table 3: Maine’s performance on the six outcome measures for which national standards have been established (2001 data)**

<b>Outcome Measure</b>	<b>National Standard</b>	<b>Maine Data</b>
Of all children who were victims of a substantiated or indicated maltreatment report in the first 6 months of CY 2001, what percent were victims of another substantiated or indicated report within a 6-month period?	6.1% or less	5.7%
Of all children who were in foster care in the first 9 months of CY 2001, what percent experienced maltreatment from foster parents or facility staff members?	0.57% or less	0.48%
Of all children who entered foster care in FY 2001, what percent were re-entering care within 12 months of a prior foster care episode?	8.6% or less	7.3%
Of all children reunified from foster care in FY 2001, what percent were reunified within 12 months of entry into foster care?	76.2% or more	54.2%
Of all children who were adopted from foster care in FY 2001, what percent were adopted within 24 months of their entry into foster care?	32.0% or more	11.9%
Of all children in foster care during FY 2001 for less than 12 months, what percent experienced no more than 2 placement settings?	86.7% or more	74.1%

**Table 4: CFSR Ratings for the Seven Systemic Factors for Maine**

<b>Systemic Factors</b>	<b>In Substantial Conformity?*</b>	<b>Rating</b>
<b>IV. Statewide Information System</b>	<b>Yes (3)</b>	
Item 24: System can identify the status, demographic characteristics, location and goals of children in foster care		Strength
<b>V. Case Review System</b>	<b>No (2)</b>	
Item 25: Process for developing a case plan and for joint case planning with parents		ANI
Item 26: Process for 6-month case reviews		Strength
Item 27: Process for 12-month permanency hearings		ANI
Item 28: Process for seeking TPR in accordance with ASFA		ANI
Item 29: Process for notifying caregivers of reviews and hearings and for opportunity for them to be heard		ANI
<b>VI. Quality Assurance System</b>	<b>No (2)</b>	
Item 30: Standards to ensure quality services and ensure children’s safety and health		ANI
Item 31: Identifiable QA system that evaluates the quality of services and improvements		Strength
<b>VII. Training</b>	<b>Yes (3)</b>	
Item 32: Provision of initial staff training		ANI
Item 33: Provision of ongoing staff training that addresses the necessary skills and knowledge.		Strength
Item 34: Provision of training for caregivers and adoptive parents that addresses the necessary skills and knowledge		Strength
<b>VIII. Service Array</b>	<b>No (2)</b>	
Item 35: Availability of array of critical services		ANI
Item 36: Accessibility of services across all jurisdictions		ANI
Item 37: Ability to individualize services to meet unique needs		Strength
<b>IX. Agency Responsiveness to the Community</b>	<b>Yes (3)</b>	
Item 38: Engages in ongoing consultation with critical stakeholders in developing the CFSP		Strength
Item 39: Develops annual progress reports in consultation with stakeholders		ANI
Item 40: Coordinates services with other Federal programs		Strength
<b>X. Foster and Adoptive Parent Licensing, Recruitment and Retention</b>	<b>Yes (4)</b>	
Item 41: Standards for foster family and child care institutions		Strength
Item 42: Standards are applied equally to all foster family and child care institutions		Strength
Item 43: Conducts necessary criminal background checks		Strength
Item 44: Diligent recruitment of foster and adoptive families that reflect children’s racial and ethnic diversity		Strength
Item 45: Uses cross-jurisdictional resources to find placements		Strength

\*Systemic factors are rated on a scale from 1 to 4. A rating of 1 or 2 indicates “Not in Substantial Conformity.” A rating of 3 or 4 indicates Substantial Conformity.

\*\* Individual items may be rated either as a Strength or as an Area Needing Improvement (ANI)

## Introduction

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Maine. The CFSR was conducted the week of July 21, 2003. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the State child welfare agency – the Maine Department of Human Services, Bureau of Child and Family Services (BCFS);
- The State Data Profile, prepared by the Children’s Bureau of the U.S. Department of Health and Human Services, which provides State child welfare data for the years 1999 through 2001;
- Reviews of 50 cases at three sites (Lewiston, Portland, and Biddeford) throughout the State; and
- Interviews or focus groups (conducted at all three sites and at the State-level) with stakeholders including, but not limited to children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys.

The key characteristics of the 50 cases reviewed are the following:

- Twenty-four cases were reviewed in Portland, 12 in Lewiston, and 14 in Biddeford.
- All 50 cases had been open cases at some time during the period under review.
- Thirty-one cases were “foster care cases” (cases in which children were in the care and custody of the State child welfare agency and in an out-of-home placement at some time during the period under review), and 19 were “in-home services cases” (cases in which families received services from the child welfare agency while children remained with their families and no child in the family was in out-of-home care during the period under review).
- Of the 31 foster care cases, 21 children (68%) were younger than age 10 at the start of the period under review; 7 children (22%) were at least 10 years old, but not yet 13 years old; and 3 children (10%) were 13 years of age and older at the start of the period under review.
- All children in the family were White in 47 cases, Native American in 1 case, and of two or more races in 2 cases.
- Of the 50 cases reviewed, the **primary** reason for the opening of a child welfare agency case was the following:
  - Neglect (not including medical neglect) – 18 cases (36%)
  - Sexual abuse – 7 cases (14%)
  - Physical abuse – 5 cases (10%)
  - Emotional maltreatment – 5 cases (10%)
  - Substance abuse of parents – 4 cases (8%)
  - Child’s behavior – 3 cases (6%)
  - Domestic violence in child’s home – 2 cases (4%)
  - Medical neglect – 2 cases (4%)

- Mental/physical health of parent – 1 case (2%)
- Abandonment – 1 case (2%)
- Mental/physical health of child – 1 case (2%)
- Parent incarcerated – 1 case (2%)
- Of the 50 cases reviewed, the most frequently cited of all reasons for children coming to the attention of the child welfare agency were the following:
  - Neglect (not including medical neglect) – 40 cases (80% of all cases)
  - Emotional maltreatment – 24 cases (48% of all cases)
  - Substance abuse by parents – 21 cases (42% of all cases)
  - Physical abuse – 21 cases (42 % of all cases)
  - Sexual abuse – 17 cases (34% of all cases)
- In 22 (71%) of the 31 foster care cases, the children entered foster care prior to the period under review and remained in care during the entire period under review.

The first section of the report presents CFSR findings relevant to the State's performance in achieving seven outcomes for children in the areas of safety, permanency, and well-being. For each outcome, there is a table presenting key findings, a discussion of the State's status with regard to the outcome, and a presentation and discussion of each item (indicator) assessed. For the most part, findings are presented for all three sites taken together, with differences among sites described when they are particularly noteworthy. The second section of the report provides an assessment and discussion of the findings regarding seven systemic factors relevant to the child welfare agency's ability to achieve positive outcomes for children.



## SECTION 1: OUTCOMES

### I. SAFETY

#### Safety Outcome 1

<b>Outcome S1: Children are, first and foremost, protected from abuse and neglect.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Lewiston</b>	<b>Portland</b>	<b>Biddeford</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	10	17	8	35	72.9
Partially Achieved:	2	5	5	12	25.0
Not Achieved or Addressed:	0	0	1	1	2.1
Not Applicable:	0	2	0		
<b>Conformity of Statewide data indicators with national standards:</b>					
	<b>National Standard (percent)</b>	<b>State's Percentage</b>	<b>Meets Standard</b>	<b>Does Not Meet Standard</b>	
Repeat maltreatment	6.1 or less	5.7	X		
Maltreatment of children in foster care	.57 or less	.48	X		

#### STATUS OF SAFETY OUTCOME 1

Maine did not achieve substantial conformity with Safety Outcome 1. This determination was based on the finding that the outcome was substantially achieved in 74.0 percent of the cases reviewed, which is less than the 90 percent required for a rating of substantial conformity. However, data for 2001 reported in the State data profile, indicate that the State met the national standards for (1) the percentage of children experiencing more than one substantiated or indicated child maltreatment report within a 6-month period, and (2) the percentage of children maltreated while in foster care.

Performance with regard to this outcome varied across the sites included in the onsite CFSR. The outcome was determined to be substantially achieved in 83 percent of the Lewiston cases and 77 percent of the Portland cases, compared to only 57 percent of the Biddeford cases.

A key finding of the CFSR case reviews was that BCFS does not consistently respond to maltreatment reports in accordance with State-established timeframes. In 58 percent of the applicable cases reviewed, BCFS did not establish face-to-face contact with the

child victim in a timely manner. Although these were cases in which responses to maltreatment reports were delayed past State policy requirements, none of the reports required that the agency establish face-to-face contact either immediately or within 24 hours.

An additional finding of the CFSR is that the State’s “two-phase” process of assigning maltreatment allegations for investigation results in long periods of time before the child who is the subject of the report is actually seen by a social worker, even when the timeframes are consistent with State requirements. The first “phase” begins with the time the allegation is received and ends when the allegation is assigned to a District Office for investigation. The second “phase” begins when a supervisor at the District Office assigns the report to a social worker and ends when she or he makes face-to face contact with the child. Stakeholders noted that sometimes it can take up to 21 days before this process is completed, even for reports that are classified as “high risk.”

The CFSR case reviews did not find evidence of frequent repeat maltreatment, as it is measured for the case review instrument (item 2). In addition the State’s incidence of maltreatment recurrence (5.7%) for 2001, as reported in the State Data Profile, meets the national standard of 6.1 percent or less. However, stakeholders reported that maltreatment allegations on open cases often are handled by the ongoing caseworker rather than reported to intake for investigation. Consequently all actual instances of maltreatment recurrence may not be captured in the State’s data.

Findings pertaining to the specific items assessed under Safety Outcome 1 are presented below.

### **Item 1. Timeliness of initiating investigations of reports of child maltreatment**

Strength       Area Needing Improvement

**Review Findings:** The assessment of item 1 was applicable for 19 of the 50 cases. Thirty-one cases were not applicable because they did not involve reports of child maltreatment during the period under review. In assessing item 1, reviewers were to determine whether the response to a maltreatment report occurring during the period under review had been initiated in accordance with the State child welfare agency’s requirements. In Maine, a “respond by” date is attached to the report when it is assigned to a social worker. The “respond by” date refers to the latest date by which the social worker must have face-to-face contact with critical case members related to the assigned report. These timeframes are the following:

- Immediately
- Within 24 hours
- Within 3 days
- Within 7 days

The results of the case review assessments were the following:

- Item 1 was rated as a Strength in 8 (42%) of the 19 applicable cases (4 of which were foster care cases).
- Item 1 was rated as an Area Needing Improvement in 11 (58%) of the 19 applicable cases (5 of which were foster care cases).

Item 1 was rated as a Strength when a response to a maltreatment report was initiated and face-to-face contact established within the timeframes required by the State. The item was rated as an Area Needing Improvement when the response was not initiated within required timeframes. In 6 of the 11 cases rated as an Area Needing Improvement for this item, the maltreatment report required a face-to-face contact within 3 days; in 5 cases, the maltreatment report required a response within 7 days. Delays in meeting the required timelines ranged from 4 to 20 days.

Many stakeholders commenting on this item during the onsite CFSR voiced concern about the lack of timely response to maltreatment reports. Some stakeholders attributed the delays in responding to staff shortages and staff turnover. Stakeholders also were in agreement that there is confusion about what constitutes an appropriate response timeframe because there are policies regarding “assigning” cases and there are policies regarding “establishing face-to-face contact.” Stakeholders indicated that because not all cases are assigned immediately, this “two phase” process can extend the time to respond to a maltreatment report to 21 days, even for a high priority case. In 4 of the cases reviewed, face-to-face contact was not established for up to 20 days after a receipt of a maltreatment allegation, although these were not classified as “high risk” reports (i.e., as requiring that face-to-face contact be established immediately).

State-level stakeholders reported that there is no formal policy on timeframes and response times for reports of institutional abuse. They noted that, in the past, it might be a month before a report was assigned to an investigator, even if the report was classified as high priority. However, at present, reports have been assigned to an investigator within a week. Stakeholders said that although this is a significant improvement, it is still not as prompt as is necessary to ensure children’s safety. State-level stakeholders noted that BCFS has substantially reduced the backlog in responding to reports of institutional abuse by establishing a unit in the agency devoted to this effort.

Finally, stakeholders noted that when the agency accepts a report for investigation and determines that the risk level is appropriate for a referral to a Community Intervention Program (CIP) for assessment, there is a possibility that the assessment may never be done because CIP intervention can be refused by the family. Although if the family refuses CIP intervention, the CIP can refer the family back to BCFS for a more traditional investigation response, stakeholders questioned whether the CIP does this on a routine basis. Thus, a key concern voiced by stakeholders is that the agency may accept reports for investigation that are neither investigated by BCFS nor assessed by a CIP.

**Determination and Discussion:** Item 1 was assigned an overall rating of Area Needing Improvement based on the finding that in 58 percent of the applicable cases, the agency had not initiated a response to a maltreatment report in accordance with required timeframes. A key concern identified pertained to the delays in responding due to the State’s “two phase” response process in which there are different timeframes for assigning cases to be investigated and for actually establishing face-to-face contact with the child.

According to the Statewide Assessment, Maine employs a central intake system that receives all reports of abuse and neglect. Intake social workers determine if the report is appropriate for assessment and assign a level of safety at the time of the report. Following supervisory approval, reports are sent to the district office. District office supervisors determine which reports require an immediate response and which should be assigned to casework staff for further investigation and assessment.

The Statewide Assessment also notes that cases assigned a low to moderate risk rating may be diverted to contracted CIPs. As indicated in the Statewide Assessment, while the total number of referrals to Child Protective Intake increased from 2000 to 2001, the number assigned to BCFS’ Child Protective Services decreased because of referrals to CIPs. However, BCFS’s goal is to assume responsibility for completing more of the total number of assessments required so as to enable the CIPs to provide more prevention and reunification support services. Thus, the objective is for the State to investigate abuse and/or neglect allegations and use the CIPs to provide in-home placement prevention and post-reunification services.

The Statewide Assessment also reports that, at present, CIPs report to BCFS on the outcome for each referred family. If safety concerns arise during the assessment of a referral, the case is immediately referred back to BCFS. State-level stakeholders reported that Community Intervention Programs receive reports that the State has not investigated and assesses them, but does not investigate them or make a disposition, although the assessment process does include a determination of the risk of harm to the child.

## **Item 2. Repeat maltreatment**

Strength                       Area Needing Improvement

**Review Findings:** The assessment of item 2 was applicable for 48 of the 50 cases. Two cases were not applicable because there was never a substantiated maltreatment report on the family. In one case, the child entered foster care through the juvenile justice system. In the other case, the family had multiple maltreatment reports that were never substantiated, but a judge ordered the State to take custody of the child during the parent’s divorce hearing because he determined that the child was being emotionally abused. In assessing this item, reviewers were to determine whether there had ever been a substantiated report on the family. Reviewers also

were to determine if there was at least one substantiated maltreatment report during the period under review, and if so, if another substantiated or indicated report occurred within 6 months of that report. The results of the assessment were the following:

- Item 2 was rated as a Strength in 45 (94%) of the 48 applicable cases (28 of which were foster care cases)
- Item 2 was rated as an Area Needing Improvement in 3 (6%) of the 48 applicable cases (1 of which was a foster care case)

Item 2 was rated as a Strength under the following circumstances:

- There was a substantiated maltreatment report involving the family prior to the period under review, but no substantiated or indicated report during the period under review (31 cases).
- There was a substantiated maltreatment report involving the family during the period under review, but there was no substantiated or indicated report within 6 months of that report (13 cases).
- There were two substantiated maltreatment reports within 6 months of one another, but they did not involve the same perpetrator (1 case).

The item was rated as an Area Needing Improvement in 3 cases in which 2 or more reports occurred within 6 months of a previous report and involved similar circumstances and the same perpetrator.

Findings for all 50 cases with respect to the frequency of maltreatment reports on the family prior to and during the period under review were the following:

- In 1 case, there were no maltreatment reports over the life of the case.
- In 5 cases, there was 1 maltreatment report over the life of the case.
- In 28 cases, there were between 2 and 5 maltreatment reports over the life of the case.
- In 10 cases, there were between 6 and 12 maltreatment reports over the life of the case.
- In 6 cases, there were 13 or more maltreatment reports over the life of the case.

Although it is not known how many of these reports were substantiated, 32 percent of the cases reviewed involved families who were the subject of 6 or more maltreatment reports from the time of their initial contact with the agency.

Some stakeholders commenting on this item noted that maltreatment recurrence does not appear to be a frequent event. However, several stakeholders reported that some allegations are referred to CIPs for assessment and are not investigated. Stakeholders also said that new maltreatment allegations on open cases often are addressed by the ongoing social worker and are not routinely reported to central intake as new allegations. The allegations on open cases and the allegations referred to CIPs would not be reported to the National Child Abuse and Neglect Data System as investigated reports requiring a determination regarding substantiation and, consequently, would not be included in the State Data Profile's assessment of maltreatment recurrence.

**Determination and Discussion:** Item 2 was assigned an overall rating of Strength based on the following:

- The State's rate of maltreatment recurrence for 2001 (5.7%) reported in the State Data Profile, meets the national standard of 6.1 percent or less.
- In 94 percent of the cases reviewed, there was no repeat maltreatment as measured by the CFSR case review instrument.

According to the Statewide Assessment, BCFS developed and implemented more sophisticated global assessment procedures to address maltreatment recurrence. The Statewide Assessment notes that, while meeting the national standard may reflect the new focused assessment skills of social work staff, it also is possible that discrepancies in the way repeat maltreatment is defined, as well as delays in reporting, may affect the data. The Statewide Assessment also notes that BCFS' Reform Initiative stresses the timely completion of safety assessments and that this effort, combined with the improved ability of the Community Intervention Programs to collect and report data, may result in more accurate reporting and a subsequent increase in the incidence of maltreatment recurrence as reported in the data profile. The goal appears to be to ensure that the CIPs conduct comprehensive and appropriate assessments, which is not occurring at present on a routine basis.

**Safety Outcome 2**

<b>Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Lewiston</b>	<b>Portland</b>	<b>Biddeford</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	9	17	11	37	75.5
Partially Achieved:	2	2	1	5	10.2
Not Achieved or Addressed:	1	4	2	7	14.3
Not Applicable:		1			

**STATUS OF SAFETY OUTCOME 2**

Maine did not achieve substantial conformity with Safety Outcome 2. This determination was based on the finding that the outcome was substantially achieved in 75.5 percent of the cases reviewed, which does not meet the 90 percent required for substantial conformity.

A key finding of the CFSR case reviews was that BCFS is not consistent in providing appropriate services to families to protect children in the home and prevent their removal, and is not consistently effective in reducing the risk of harm to children. The key concern identified pertained to inadequate assessments resulting in the delivery of services that are not appropriate to ensure the

child's safety and reduce risk of harm. In particular, case reviewers reported a lack of adequate assessments and services in cases in which sexual abuse was a primary or secondary reason for agency contact with the family.

Findings pertaining to the specific items assessed under Safety Outcome 2 are presented and discussed below.

### **Item 3. Services to family to protect child(ren) in home and prevent removal**

Strength       Area Needing Improvement

**Review Findings:** There were 27 cases for which an assessment of item 3 was applicable. Twenty-three foster care cases were excluded from this assessment because the children entered foster care prior to the period under review and/or there were no substantiated or indicated maltreatment reports or identified risks of harm to the children in the home during the period under review. For this item, reviewers assessed whether, in responding to a substantiated maltreatment report or risk of harm, the agency made diligent efforts to provide services to families to prevent removal of children from their homes while at the same time ensuring their safety. The results of the assessment were the following:

- Item 3 was rated as a Strength in 19 (70%) of the 27 applicable cases (6 of which were foster care cases).
- Item 3 was rated as an Area Needing Improvement in 8 (30%) of the 27 applicable cases (2 of which were foster care cases).

Item 3 was rated as a Strength when reviewers determined one or more of the following:

- Appropriate services were provided to the parents and child to prevent removal (19 cases).
- The children were appropriately removed from the home to ensure their safety (3 cases).

This item was rated as an Area Needing Improvement when reviewers determined the following:

- The agency did not conduct necessary assessments or offer appropriate services to ensure that children could be safely maintained in the home (3 cases).
- The agency offered services, but they were not adequate to ensure the safety of the children in the home (5 cases). For example, in one case, the agency provided homemaker services, but did not address the parent's substance abuse problems. In another case, the agency addressed parent's domestic violence problems, but did not address apparent sexual abuse issues.

Services provided to the families included, but were not limited to: sex offender treatment, domestic violence interventions, individual and family therapy, psychological assessments and evaluations, psychosexual evaluations, individual and family counseling, support groups, parenting education classes, parenting capacity evaluations, transportation to facilitate visitation, medical/forensic evaluations,

substance abuse treatment, mental health treatment, in-home services, attachment evaluations, homemaker services, day care, and voluntary placements.

Stakeholders commenting on this item were in general agreement that BCFS attempts to maintain children in the home whenever possible. However, stakeholders expressed differing opinions regarding the effectiveness of this effort. While some stakeholders suggested that there are sufficient community-based services and supports to maintain children safely in the home, others indicated that, although services are available, there are delays in access to services. Stakeholders in Lewiston, in particular, noted that children in that locality are likely to be removed from home because of a lack of services or because of long waiting lists for services.

***Determination and Discussion:*** This item was assigned an overall rating of Area Needing Improvement because in 30 percent of the applicable cases, reviewers determined that the agency had not made diligent efforts to provide the necessary services to maintain children safely in their own homes. A key concern identified was that the services provided to families while children remained in the home were not always sufficient to ensure the children’s safety because they did not address all of the factors contributing to the maltreatment.

According to the Statewide Assessment, if BCFS determines that it is unlikely that the safety of the child will be maintained without continued BCFS involvement, a Child and Family Assessment is completed. The purpose of this assessment is to identify the underlying causes of the abuse and neglect and its impact on the child. At this time, an individualized Family Service Plan is developed with the family to prevent removal.

As noted in the Statewide Assessment, BCFS attempts to stabilize families in crisis through the provision of home-based family preservation services and child and family support programs that range in duration and intensity. However, the Statewide Assessment also notes that new funding to develop and expand home-based services to prevent removal was recently rescinded.

#### **Item 4. Risk of harm to child**

Strength       Area Needing Improvement

***Review Findings:*** An assessment of item 4 was applicable for 49 cases. One foster care case was not applicable for assessment because contact with BCFS was due to the child’s behavior and the child was not at risk of harm from guardians or parents. In assessing item 4, reviewers were to determine whether the agency had made, or was making, diligent efforts to reduce the risk of harm to the children involved in each case. The assessment resulted in the following findings:



- Item 4 was rated as a Strength in 39 (80%) of the 49 applicable cases (29 of which were foster care cases).
- Item 4 was rated as an Area Needing Improvement in 10 (20%) of the 49 applicable cases (1 of which was a foster care case).

Item 4 was rated as a Strength when reviewers determined the following:

- The risk of harm to children was appropriately managed by providing services to families to address risk concerns while the children remain in the home (6 cases).
- The risk of harm to children was appropriately managed by removing the perpetrator from the home and preventing contact between the child and the perpetrator (1 case).
- The risk of harm to children was appropriately managed by removing the children from home either prior to or during the period under review and providing services to the family (21 cases).
- The risk of harm to children was appropriately addressed by removing the children from the home either prior to or during the period under review and seeking termination of parental rights (TPR) (9 cases).
- The risk of harm was managed by placing children voluntarily with relatives to prevent foster care placement (2 cases).

The item was rated as an Area Needing Improvement when reviewers determined the following:

- Either no services were offered or the services offered by the agency were insufficient to reduce the risk of harm to the child (4 cases).
- The agency did not take the necessary measures to ensure that risk of harm was adequately addressed (3 cases).
- The assessment was not sufficient to identify underlying problems that contribute to risk of harm to the child (3 cases).

Several stakeholders commenting on this issue expressed concern about BCFS' effectiveness in addressing risk of harm to children in foster care. A key concern identified pertained to the lack of formal policies regarding investigating allegations of maltreatment of children by foster parents or facility staff. Stakeholders reported that, although investigations of these reports are taking place in a more timely manner than they did in the past, there continue to be significant delays in responding.

Stakeholders praised the State for establishing requirements for well-being and safety checks for all children in foster care and for ensuring that children (who are old enough) are interviewed separately during this process. However, several stakeholders reported that this "check" is conducted only once every 3 months, and many children are not visited by their social worker during the time span between these well-being and safety checks.

Finally several stakeholders expressed concern about BCFS' effectiveness in managing risk of harm to children in the in-home services cases. They noted that, after the initial safety assessment, social workers rarely visit the children or the parents and depend on

contracted service providers for information about the family. Stakeholders reported that sometimes this results in situations in which children are left at home still at risk and BCFS is not aware of the situation.

**Determination and Discussion:** This item was assigned an overall rating of Area Needing Improvement because in 20 percent of the applicable cases, reviewers determined that BCFS was not effective in addressing the risk of harm to the children. Key concerns identified pertained to the provision of services that were not sufficient to reduce risk of harm or that did not address all of the apparent risk factors in the family, particularly risk factors associated with sexual abuse.

According to the Statewide Assessment, the Safety Assessment protocol provides a framework by which the degree of severity of harm, the imminence of child abuse and neglect, and the current level of safety for each child is assessed in reported case. The Statewide Assessment notes that substantiated cases were opened at the rate of 62 percent in 2000 and 55 percent in 2001. When BCFS substantiates abuse/neglect by using the assessment protocol, the removal decision is based on the parent/caretaker’s ability and willingness to safely care for the child.

## II. PERMANENCY

### Permanency Outcome 1

<b>Outcome P1: Children have permanency and stability in their living situations.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Lewiston</b>	<b>Portland</b>	<b>Biddeford</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	0	5	2	7	22.6
Partially Achieved:	4	9	5	18	58.1
Not Achieved or Addressed:	3	2	1	6	19.3
Not Applicable:	5	8	6		
<b>Conformity of Statewide data indicators with national standards:</b>					
	<b>National Standard (percentage)</b>	<b>State’s Percentage</b>	<b>Meets Standard</b>	<b>Does Not Meet Standard</b>	
Foster care re-entries	8.6 or less	7.3	X		
Length of time to achieve reunification	76.2 or more	54.2		X	
Length of time to achieve adoption	32.0 or more	11.9		X	
Stability of foster care placements	86.7 or more	74.1		X	

## STATUS OF PERMANENCY OUTCOME 1

Maine did not achieve substantial conformity with Permanency Outcome 1. This was based on the following findings:

- The outcome was substantially achieved in 22.6 percent of the cases, which is less than the 90 percent required for a determination of substantial conformity.
- Fiscal year (FY) 2001 data reported in the State Data Profile indicate that the State did not meet the national standards for the percentage of children who (1) achieved reunification within 12 months of entry into foster care, (2) achieved a finalized adoption within 24 months of entry into foster care, or (2) experienced no more than 2 placement settings after having been in foster care for 12 months or less.

However, FY 2001 data provided in the State Data Profile indicate that the State met the national standard for the percentage of children entering foster care who were re-entering within 12 months of discharge from a prior foster care episode.

Although all localities included in the onsite CFSR performed poorly on this outcome, Portland cases were more likely to have substantially achieved this outcome (31%) than Biddeford (25%) or Lewiston (0 cases).

The results of the case reviews and the data provided in the State Data Profile suggest that BCFS is not consistently effective with regard to (1) ensuring children's placement stability while in foster care, (2) establishing appropriate permanency goals in a timely manner, or (3) making diligent efforts to achieve children's permanency goals in a timely manner. Both the Statewide data and the case review findings, however, indicate that BCFS is effective in preventing re-entry into foster care.

The key concern identified from case reviews and stakeholder interviews was that children remain in foster care for too long. This was attributed to various factors including, but not limited to, the following:

- Social workers tend to equate stability with permanency, so that if children are in stable foster care placements, social workers do not attend to permanency issues.
- The goal of reunification is maintained for long periods of time (by both the courts and the agency), even when the prognosis for reunification is low.
- Many social workers believe that both children and parents must be "completely fixed" before permanency (either through adoption or reunification) can be achieved. This can result in delays in reunifying families, changing goals from reunification to adoption, seeking termination of parental rights (TPR), or seeking adoptive placements.

Findings pertaining to the specific items assessed under Permanency Outcome 1 are presented below.

**Item 5. Foster care re-entries**

Strength       Area Needing Improvement

**Review Findings:** Eight of the 31 foster care cases were applicable for an assessment of foster care re-entries because they involved children who entered foster care at some time during the period under review. In assessing this item, reviewers determined whether the entry into foster care during the period under review occurred within 12 months of discharge from a prior foster care episode. The assessment resulted in the finding that all 8 cases (100%) were rated as a Strength for this item.

Cases were rated as a Strength for this item when the child’s entry into foster care during the period under review did not take place within 12 months of discharge from a prior episode.

Stakeholders commenting on this item noted that it is rare that children re-enter foster care in the State. Stakeholders attributed this to (1) the fact that children stay in foster care for a long time, and (2) the tendency of social workers to delay returning children to live with parents who have undergone substance abuse treatment until they are sure that the parents will not relapse.

**Determination and Discussion:** Item 5 was assigned an overall rating of Strength based on the following:

- In 100 percent of the applicable cases reviewed, children did not re-enter foster care within 12 months of discharge from a prior episode.
- FY 2001 data in the State Data Profile indicate that Maine’s re-entry rate (7.3%) met the national standard of 8.6 percent or less.

According to the Statewide Assessment, both the Statewide data and the results of the State’s pilot CFSR review indicate that, in general, children in Maine do not re-enter foster care once they have been discharged. The Statewide Assessment also notes that factors associated with the low rate of re-entry might include the corresponding length of stay in foster care, as well as the State’s efforts to support reunifications.

**Item 6. Stability of foster care placement**

Strength       Area Needing Improvement

**Review Findings:** All 31 foster care cases were applicable for an assessment of Item 6. In assessing this item, reviewers were to determine whether the child experienced multiple placement settings during the period under review and, if so, whether the changes in placement settings were necessary to achieve the child's permanency goal or meet the child's service needs. The findings of this assessment were the following:

- Item 6 was rated as a Strength in 20 (65%) of the 31 applicable cases.
- Item 6 was rated as an Area Needing Improvement in 11 (35%) of the 31 applicable cases.

Additional findings of the case review were the following:

- Children in 17 cases experienced only 1 placement during the period under review.
- Children in 5 cases experienced 2 placements during the period under review.
- Children in 1 case experienced 3 placements during the period under review.
- Children in 8 cases experienced 4 or more placements during the period under review.

Item 6 was rated as a Strength when reviewers determined either that the child did not experience a placement change during the period under review (17 cases), or that the placement changes experienced were in the child's best interest (4 cases), such as movement to a less restrictive placement. The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- The child's current placement was not stable (4 cases).
- Placement changes were due to a lack of adequate placement resources (2 cases).
- Placement changes were due to a lack of agency efforts to support a placement that was experiencing problems (2 cases).
- Placement changes were the result of inappropriate matching of children with placement resources (5 cases). For example, in one case, a placement disrupted because the child was moved to a less restrictive placement setting without an assessment being conducted on the appropriateness of this move. In another case, a child experienced a number of placement disruptions due to behavior problems until it was determined that a therapeutic foster home was needed.

Stakeholders commenting on this issue expressed the opinion that stability in foster care is a concern for the State. State-level stakeholders reported that BCFS is engaging in several initiatives that are designed to improve placement stability. Some stakeholders noted that children often are placed in Bridge Homes for diagnostic purposes. They expressed concern that although these placements are intended to be short-term, they may last several months because of a lack of alternative placement resources.

Stakeholders also suggested that foster parents do not receive adequate supports when there is a problem with a placement and that this may contribute to children's experience of placement instability. There was general consensus among stakeholders that children in therapeutic foster homes experience more stability than children in other types of placements.

**Determination and Discussion:** Item 6 was assigned an overall rating of Area Needing Improvement based on the following findings:

- In 35 percent of the applicable cases, reviewers determined that children experienced multiple placement changes that did not promote attainment of their goals or meet their treatment needs.
- FY 2001 data from the State Data Profile indicate that Maine’s percentage of children experiencing no more than 2 placements in their first 12 months in foster care (74.1) did not meet the national standard of 86.7 percent or more.

A key finding of the case reviews was that placement instability often could be attributed to inadequate matching of children with appropriate resources, resulting in placements that eventually disrupted.

According to the Statewide Assessment, data analyses conducted by the Chapin Hall Center for Children indicate that 73 percent of children in foster care in Maine experience at least one change of placement. Older children, children living in metropolitan areas, and children who have been in care for long periods of time are more likely than other children to experience multiple placements. The Statewide Assessment also notes that placement changes may be due to BCFS’ use of “Bridge Homes,” which are temporary placements designed to provide a thorough assessment of the child’s needs so as to ensure an appropriate long-term placement. Also BCFS sometimes places children in short-term emergency settings until an appropriate placement is available.

### **Item 7. Permanency goal for child**

Strength       Area Needing Improvement

**Review Findings:** All 31 foster care cases were applicable for an assessment of item 7. In assessing this item, reviewers were to determine whether the agency had established an appropriate permanency goal for the child in a timely manner. The results of this assessment were the following:

- Item 7 was rated Strength in 15 (48%) of the 31 applicable cases.
- Item 7 was rated as an Area Needing Improvement in 16 (52%) of the 31 applicable cases.

Although no site included in the onsite CFSR performed at a high level on this item, there were substantial cross-site differences in performance. The item was rated as a Strength in 62.5 percent of Portland cases and 50 percent of Biddeford cases, compared to 14 percent of Lewiston cases.

The case review found that children in the 26 foster care cases had the following permanency goals:

- 14 children had a goal of adoption.
- 8 children had a goal of reunification.

- 8 children had a goal of long-term foster care or emancipation.
- 1 child had a goal of permanent placement with relatives.

At the time of the onsite review, 25 (81%) of the 31 children in the foster care cases had been in foster care for 15 of the most recent 22 months. TPR had been filed in 21 of the 25 cases. For the four cases for which TPR had not yet been filed, there were reasons for not filing in two of the case files, but no reason provided in the other two case files.

Item 7 was rated as a Strength when reviewers determined that the child's permanency goal was appropriate and had been established in a timely manner. This item was rated as an Area Needing Improvement when reviewers determined the following:

- The goal is not appropriate given the needs of the child and the circumstances of the case (4 cases).
- The goal is appropriate, but there was a delay in establishing the goal (12 cases).

Reviewers also determined that there was no evidence of concurrent permanency goals in the cases reviewed.

Stakeholders commenting on this item expressed a range of opinions regarding the issue of establishing appropriate permanency goals in a timely manner. While some stakeholders suggested that the agency is effective in establishing permanency goals in a timely manner, other stakeholders identified this as an area needing improvement. Stakeholders were in general agreement that concurrent planning is not being implemented on a consistent basis across the State. However, a few stakeholders voiced concern about the value of concurrent planning. They noted that some social workers have expressed concern that they are being pressured into using this practice when they do not believe it is appropriate.

Several stakeholders suggested that the goal of long-term foster care is being inappropriately established for children, particularly for young children, and often is established “by default,” because the agency did not make concerted efforts to achieve other, more permanent, goals. State-level stakeholders reported that treatment foster care providers are influential in promoting the goal of long-term foster care because it ensures that they will continue to receive the existing level of financial and service supports. Stakeholders suggested that, in order to prevent jeopardizing the child’s placement stability, social workers and judges often comply with the request of treatment foster care providers to establish a goal of long-term foster care for a child.

There was general agreement among stakeholders that agency staff are not encouraged to explore adoption for older children and do not receive training in working with older children around the goal of adoption. A few stakeholders noted that the fact that there are no provisions in the State that allow for open adoptions may have an impact on the timeliness of changing a goal from reunification to adoption.

**Determination and Discussion:** Item 7 was assigned an overall rating of Area Needing Improvement based on the finding that in 52 percent of the applicable cases, reviewers determined that the agency had not established an appropriate goal for the child in a timely manner. A key concern pertained to delays in establishing goals in a timely manner. Of particular concern was the finding that the goal of reunification often is maintained for a long time even when achieving this goal appears unlikely.

According to the Statewide Assessment, the BCFS has established that the preferred permanency option for children in placement is safe reunification. When this goal cannot be achieved, the next preference is for kinship placement or adoption. The Statewide Assessment notes that the majority of children in BCFS' care have permanency goals of reunification and adoption, although the third most likely goal is long-term foster care. A recent review of cases with the goal of long-term foster care found that this goal often is inappropriately selected or assigned, particularly for children between the ages of 6-12. The Statewide Assessment attributed the high percentage of children with this goal to the following: (1) social workers often confuse stability with permanency and therefore do not explore other permanency options for children who are in stable foster homes; (2) social worker turnover, which is high, results in a lack of follow up with children to assess their permanency status, (3) there are an insufficient number of adoptive homes available for high needs children; (4) social workers have a preference for therapeutic foster parents, and often these foster parents choose not to adopt because they would lose their existing level of financial and service supports, and (5) there is a general belief among BCFS staff that long-term foster care is an acceptable permanency choice.

### **Item 8. Reunification, Guardianship, or Permanent Placement With Relatives**

Strength       Area Needing Improvement

**Review Findings:** Item 8 was applicable for 9 of the 31 foster care cases. In assessing these cases, reviewers were to determine whether the agency had achieved the goals of reunification or permanent placement with relatives in a timely manner or, if the goals had not been achieved, whether the agency had made, or was in the process of making, diligent efforts to achieve the goals in a timely manner. The results of this assessment were the following:

- Item 8 was rated as a Strength in 4 (44%) of the 9 applicable cases.
- Item 8 was rated as an Area Needing Improvement in 5 (56%) of the 9 applicable cases.

Although there were only a few applicable cases in each locality, in Lewiston, none of the three applicable cases was rated as a Strength, while in Biddeford, the two applicable cases were rated as a Strength. In Portland, two of the four applicable cases were rated as a Strength.



Eight children had a permanency goal of reunification and one child had a goal of permanent placement with relatives. In three cases, the child's goal was achieved during the period under review (2 reunifications and 1 permanent placement with relatives). In two of those cases, the goal was achieved within 12 months of the child's entry into foster care.

Item 8 was rated as a Strength when reviewers determined that the child's permanency goal had been achieved in a timely manner (2 cases), or that the agency was making concerted efforts to achieve the goal in a timely manner (2 cases). The item was rated as an Area Needing Improvement when reviewers determined that adequate efforts had not been made to achieve the goal in a timely manner (5). Reviewers attributed the agency's lack of success in attaining reunifications in a timely manner to the practice of maintaining this permanency goal even when the prognosis for reunification is low (i.e., parents have not made attempts to seek services to bring about necessary changes and/or have not consistently participated in visitation or maintained contact with the social worker).

Stakeholders commenting on this item were in general agreement that children in BCFS custody remain in the foster care system for too long before they are reunified. Delays in achieving reunification were attributed to the following:

- A lack of services for parents to help them achieve their case plan goals (for example, in one county, a parent may need to wait 6 months to access mental health services, while in another county, a parent may need to wait 4 months for a parenting capacity evaluation);
- A lack of transportation for parents to access services; and
- A lack of agency effort to identify non-custodial fathers or relatives early on in the case who might be willing to be permanent caretakers.

Lewiston stakeholders noted that it takes a long time to bring about reunification in that locality because workers have very high standards. They believe, for example, that the home situation must be very good before even initiating a trial home visit. Some stakeholders in that site noted that BCFS is working toward an approach that would return children home sooner by providing supports and services at the time of return. However, these stakeholders indicated that, at present, there are insufficient in-home services to support this approach. Biddeford stakeholders suggested that in that site, BCFS does not routinely make concerted efforts to provide in-home services to support reunifications.

Several stakeholders voiced concern that once children enter treatment foster care they tend to stay there for long periods of time without permanency issues being addressed. This was attributed to the perception of many social workers that stability in a good foster home is equal to permanency.

Finally, State-level stakeholders reported that, although Maine has guardianship arrangements, they are not subsidized and the children are not discharged from agency custody. State-level stakeholders suggested that various possible strategies to permit funding of guardianships are under consideration.

**Determination and Discussion:** This item was assigned an overall rating of Area Needing Improvement based on the following findings:

- In 56 percent of the applicable cases, case reviewers determined that the agency had not made diligent efforts to attain the goals of reunification or permanent placement with relatives in a timely manner.
- FY 2001 data from the State Data Profile indicate that the percentage of reunifications occurring within 12 months of entry into foster care (54.2%) did not meet the national standard of 76.2 percent or more.

According to the Statewide Assessment, between 2000 and 2002, the percentage of children in placement who were returned to a parent each year rose from 10 to 12, and the percentage of children for whom custody was transferred to a relative remained at about .02. The Statewide Assessment also notes that the lack of needed services in some areas of the State is an impediment to reunification, particularly substance abuse treatment, domestic violence interventions, and mental health services.

In addition, information in the Statewide Assessment indicates that BCFS realizes that there has been a lack of sufficient exploration of biological family members who might provide permanency through kinship or guardianship placements. Although in 2002 the legislature approved additional funding for BCFS to expand relative/kinship care initiatives, these funds have not yet been made available to BCFS. At present, Maine does not subsidize guardianships and BCFS is working with the Cornerstone Consulting Group to develop a plan for enhancing guardianship as a permanency option for children.

### **Item 9. Adoption**

Strength       Area Needing Improvement

**Review Findings:** Fourteen of the 31 foster care cases were applicable for an assessment of item 9. In assessing this item, reviewers were to determine whether diligent efforts had been, or were being, made to finalize adoptions in a timely manner. The results were the following:

- Item 9 was rated as a Strength in 2 (14%) of the 14 applicable cases.
- Item 9 was rated as an Area Needing Improvement in 12 (86%) of the 14 applicable cases.

There were no cases in which an adoption was finalized during the period under review. In 6 of the 14 cases in which adoption was the child's permanency goal, the child was in an adoptive placement.

Item 9 was assigned a rating of Strength when reviewers determined that the agency was making concerted efforts to achieve adoption within 24 months of the child's entry into foster care (2 cases). The item was rated as an Area Needing Improvement when reviewers determined that the agency had not taken the steps necessary to achieve adoption in a timely manner. In some cases, the children had been in care for long periods of time and were placed with foster families who were not interested in adoption. In other cases, reviewers identified lack of timely filing for TPR as a key barrier to achieving adoption in a timely manner.

Stakeholders commenting on this issue were in general agreement that adoptions of children in foster care are not being finalized in a timely manner. Several stakeholders reported that, although there are delays in filing and attaining TPR, the most significant delays occur after TPR has been attained. They attributed this to a wide range of problems including, but not limited to, the following:

- Insufficient training of adoption unit social workers and supervisors around adoption issues.
- Delays in completing routine adoption paperwork in a timely manner.
- Delays in completing homestudies.
- Backlog of adoptions in the probate court, which slows down the finalization process.
- A lack of policies to promote open adoptions.
- Cuts in the adoption subsidy, resulting in foster parents deciding not to adopt and requesting that children's goals be changed from adoption to long-term foster care.
- Delays in receiving signed TPR orders.
- The perception of many social workers that children have to be "fixed" before a family would be willing to adopt them.

***Determination and Discussion:*** This item was assigned an overall rating of Area Needing Improvement based on the following findings:

- In 86 percent of the applicable cases, reviewers determined that the agency had not made concerted efforts to achieve a finalized adoption in a timely manner.
- FY 2001 data from the State Data Profile indicate that the State's percentage of finalized adoptions occurring within 24 months of removal from home (11.9%) does not meet the national standard of 32.0 percent or more.

According to the Statewide Assessment, although Maine did not achieve the national standard for adoption within 24 months, the median length of time to adoption has improved from 47.3 months in 1999 to 42.1 months in 2001. The Statewide Assessment notes that Maine has increased the number of adoptions from a baseline of 112 in 1998 to 423 in 2000, and won a U.S. Department of

Health and Human Services Adoption Excellence Award in December 2000 for making significant gains in the numbers of children adopted from the child welfare system.

The Statewide Assessment also notes that BCFS' management plan stresses a focus on timeliness of adoption and sets timeframes for the movement of cases through the adoption process. However, the lack of available and accessible services prevents the filing of TPR in some cases. Also, according to the Statewide Assessment, the court has shown a willingness to prolong reunification efforts, particularly when mental illness or retardation is a parental factor, even if the parent has demonstrated an unwillingness or inability to change.

Maine is well known for Maine Adoption Guides, a Child Welfare Demonstration Project. The project, now in its third year and implemented Statewide, seeks to increase the number of special needs adoptions, decrease the average length of time in foster care to adoption, decrease the incidence of adoption disruptions, and enhance adoptive family functioning. The project is a collaboration between BCFS and Casey Family Services.

#### **Item 10. Permanency goal of other planned permanent living arrangement**

Strength       Area Needing Improvement

**Review Findings:** Eight foster care cases were applicable for an assessment of item 10. In assessing these cases, reviewers were to determine if the agency had made, or was making, diligent efforts to assist children in attaining their goals related to other planned permanent living arrangements. The results were the following:

- Item 10 was rated as a Strength in 3 (37.5%) of the 8 applicable cases.
- Item 10 was rated as an Area Needing Improvement in 5 (62.5%) of the 8 applicable cases.

Item 10 was rated as a Strength when reviewers determined that the child was in a planned permanent living arrangement that meets his or her needs (2 cases), or that a child who was close to emancipation received appropriate services to make the transition from foster care to independent living (1 case). The item was rated as an Area Needing Improvement when reviewers determined that the child was not in a placement with a family who had expressed a commitment to provide long-term care for the child (4 cases), or that the agency had not provided sufficient services to help the child make the transition from foster care to independent living (1 case).

Stakeholders commenting on this item were in general agreement that the goal of long-term foster care is used too frequently with children and is used inappropriately in many cases. Stakeholders attributed the establishment of long-term foster care as a permanency goal to a variety of factors including, but not limited to, the following:

- High social worker caseloads.
- Social worker perceptions that stable placements are equivalent to “permanent” placements.
- Foster parents who do not want to adopt because they do not want to lose services and financial supports but they are bonded to the child.
- A parent evaluation indicating that children are “bonded” to their biological parents and therefore adoption would not be appropriate.
- A general belief among workers and supervisors that long-term foster care is an acceptable goal.
- A belief that adoptive homes cannot be found for children with behavior problems or disabilities.

Stakeholders also were in general agreement that BCFS has developed an effective independent living program and has implemented services and supports for children who will be transitioning from foster care to independent living. Stakeholders noted that the State has a tuition waiver for foster children wishing to attend college in the State’s university system.

***Determination and Discussion:*** This item was assigned an overall rating of Area Needing Improvement because in 62.5 percent of the cases with this goal, reviewers determined that the agency had not made concerted efforts to: (1) ensure that the child was in placement with a family who was committed to long-term care, or (2) provide services to help the child transition to independent living.

According to the Statewide Assessment, long-term foster care is recognized as a sometimes necessary, but not preferred, option for children in foster care. As noted in the Statewide Assessment, however, BCFS believes that there are too many cases with the goal of long-term foster care and that the goal often is inappropriately selected. As a result of this observation, policy and practice guidelines have been clarified for all District Office staff. Social workers must refer all cases with the goal of long-term foster care to the district Quality Assurance reviewer, who determines the appropriateness of the child’s plan for permanency. If the Quality Assurance reviewer approves the goal of long-term foster care, the case is then referred to the supervisor and program administrator for final approval.

## Permanency Outcome 2

<b>Outcome P2: The continuity of family relationships and connections is preserved for children.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Lewiston</b>	<b>Portland</b>	<b>Biddeford</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	2	12	5	19	61.3
Partially Achieved:	4	4	3	11	35.5
Not Achieved or Addressed:	1	0	0	1	3.2
Not Applicable:	5	8	6		

### STATUS OF PERMANENCY OUTCOME 2

Maine did not achieve substantial conformity with Permanency Outcome 2. This determination was based on the finding that the outcome was rated as substantially achieved in 61.3 percent of the cases, which is less than the 90 percent required for substantial conformity.

Performance with respect to achieving Permanency Outcome 2 varied considerably across localities included in the onsite CFSR. The outcome was determined to be substantially achieved in 75 percent of Portland cases and 62.5 percent of Biddeford cases, compared to only 29 percent of Lewiston cases.

CFSR findings indicate that BCFS makes concerted efforts to place siblings together in foster care and to promote the parent-child relationship while children are in foster care. However, case reviewers determined that the agency is not consistent in its efforts to (1) ensure that children are placed in close proximity to their parents or communities of origin, or (2) preserve connections between children and their extended families. In addition, case reviewers found that in a majority of cases, the social workers did not make concerted efforts to seek and assess relatives as placement resources, although this is required in BCFS policy.

A key concern identified with regard to this outcome pertained to visitation between children in foster care and their siblings who are also in foster care. Case reviewers determined that although BCFS makes concerted efforts to place siblings together, when they are separated, visitation often is not sufficient to meet the children's needs and maintain their connection.

Findings pertaining to the specific items assessed under Permanency Outcome 2 are presented below.

#### Item 11. Proximity of foster care placement

Strength                       Area Needing Improvement

**Review Findings:** Of the 31 foster care cases, 20 were applicable for an assessment of item 11. Cases determined to be not applicable were those in which (1) TPR had been attained prior to the period under review, (2) contact with parents was not considered to be in the child's best interest, and/or (3) parents were deceased or whereabouts were unknown. In assessing item 11, reviewers were to determine whether the child's most recent foster care setting was in close proximity to the child's parents or close relatives. The results of the assessment were the following:

- Item 11 was rated as a Strength in 16 (80%) of the 20 applicable cases.
- Item 11 was rated as an Area Needing Improvement in 4 (20%) of the 20 applicable cases.

Performance on this item varied considerably across locations. The item was rated as a Strength in 100 percent of the applicable Biddeford cases and 91 percent of the applicable Portland cases, compared to only 25 percent of the applicable Lewiston cases.

Item 11 was rated as a Strength when the child was placed in the same county or community as the family of origin (13 cases), or when reviewers determined that the out-of-county placement was appropriate either because it was still close to the parents (2 cases), or because it met the child's treatment needs (1 case). The item was rated as an Area Needing Improvement when reviewers determined that the out-of-county placement was not in close proximity to the parents and was due to a lack of placement resources.

Stakeholders commenting on this issue expressed the opinion that placement of children in close proximity to their parents and community of origin is a considerable challenge for BCFS, particularly in some areas of the State. This was attributed to a lack of family foster homes, resulting in placement of children in whatever homes are available, regardless of distance from family and community. State-level stakeholders noted that BCFS is working to increase the number of homes so that children can stay in their communities. Lewiston stakeholders were particularly concerned about the lack of placement resources in that site and the impact of out-of-district placements on reunification efforts.

**Determination and Discussion:** Item 11 was assigned an overall rating of Area Needing Improvement because in 20 percent of the cases, reviewers determined that BCFS had not made diligent efforts to ensure that children were placed in foster care placements that were in close proximity to the family and community of origin.

According to the Statewide Assessment, BCFS recognizes that too many children are placed outside of their "home" communities and that out-of-district placements often are based on availability rather than suitability. The Statewide Assessment reports that State data show that between 65 and 71 percent of all children removed from home are first placed in their home district, but that eventually, 53 percent of all foster care children experience a placement out of their home district. Children whose first placement is into group care are more likely than other children to be placed outside of their communities. However, the Statewide Assessment also notes that data

available to BCFS show no significant difference between the rates of reunification when children are placed in their home district as opposed to a different district.

### Item 12. Placement with siblings

  X   Strength             Area Needing Improvement

**Review Findings:** Twenty-one of the 31 foster care cases involved a child with siblings who were in foster care. In assessing item 12, reviewers were to determine whether siblings were, or had been, placed together and, if not, whether the separation was necessary to meet the needs (service or safety needs) of one or more of the children. This assessment resulted in the following findings:

- Item 12 was rated as a Strength in 19 (90%) of the 21 applicable cases.
- Item 12 was rated as an Area Needing Improvement in 2 (10%) of the 21 applicable cases.

In 11 of the 21 applicable cases, the child was in a placement with at least 1 other sibling, and in 5 of those cases, the child was in a placement with all siblings.

Item 12 was rated as a Strength if the child was in placement with all siblings (5 cases), or if reviewers determined that the separation of siblings was necessary to meet at least one child’s safety or treatment needs (14 cases). The item was rated as an Area Needing Improvement when reviewers determined that there was no valid reason for the separation of siblings, and that BCFS had not made concerted efforts to place sibling together.

Most stakeholders commenting on this item expressed the opinion that efforts are made to place siblings together whenever possible. However, they noted that a key barrier to placing siblings together is a lack of homes that can accommodate large sibling groups.

**Determination and Discussion:** This item was assigned an overall rating of Strength based on the finding that in 90 percent of the applicable cases, reviewers determined that BCFS made diligent efforts to place siblings together in foster care whenever possible.

According to the Statewide Assessment, Statewide data on siblings in care indicate that approximately half are placed with another sibling. The Statewide Assessment notes that BCFS has identified the need for strengthening efforts to place sibling in care together. The Statewide recruitment campaign, “A Family for ME” targets the recruitment of foster and adoptive resources for children with special needs, with placements for sibling groups identified as a targeted goal.



### Item 13. Visiting with parents and siblings in foster care

\_\_\_\_ Strength      \_\_X\_\_ Area Needing Improvement

**Review Findings:** An assessment of item 13 was applicable for 22 of the 31 foster care cases. Nine cases were not applicable for an assessment of this item because TPR had been established prior to the period under review and parents were no longer involved in the children's lives. In assessing this item, reviewers were to determine (1) whether the agency had made, or was making, diligent efforts to facilitate visitation between children in foster care and their parents and siblings in foster care, and (2) whether these visits occurred with sufficient frequency to meet the needs of children and families. The findings of this assessment were the following:

- Item 13 was rated as a Strength in 15 (68%) of the 22 applicable cases.
- Item 13 was rated as an Area Needing Improvement in 7 (32%) of the 22 applicable cases.

Typical visitation between children and their mothers for the 17 cases for which this assessment was applicable was the following:

- Weekly visits – 8 cases.
- Twice a month visits - 1 case.
- Less than monthly visits - 7 cases.
- No visits – 1 case.

Reviewers determined that the agency had made concerted efforts to promote more frequent visitation in six of the eight cases in which visits between children and their mothers occurred less frequently than once a month.

Typical visitation between children and their fathers for the 17 cases for which this assessment was applicable was the following:

- Weekly visits – 9 cases.
- Twice a month visits – 1 case.
- Less than monthly visits – 4 cases.
- No visits – 3 cases.

Reviewers determined that in six of the seven cases in which visits with father occurred less frequently than once a month, the agency had made concerted efforts to promote more frequent visitation.

Visitation between siblings was applicable in 14 cases in which siblings were not placed together in foster care. Typical visitation between siblings was the following:

- Weekly visits – 3 cases.
- Monthly visits – 2 cases.

- Twice a month visits – 2 cases.
- Less than monthly visits – 5 cases.
- No visits – 2 cases.

Reviewers determined that BCFS had made concerted efforts to promote more frequent visitation in only one of the seven cases in which visits with siblings occurred less frequently than once a month.

Item 13 was rated as a Strength when reviewers determined that the frequency of visitation met the needs of children and parents (8 cases), or that, when visitation was less frequent than needed, the agency made diligent efforts to promote more frequent visitation (7 cases). The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Visitation with parents was not sufficient to meet the child’s needs and the agency did not promote more frequent visitation (3 cases).
- Visitation with siblings was not sufficient to meet the children’s needs and the agency did not promote more frequent visitation (6 cases).

Stakeholders commenting on the issue of children’s visits with parents and siblings expressed mixed opinions. While some stakeholders reported that the agency encourages visitation and other forms of contact, other stakeholders said that lack of transportation and the distance between placements are frequent barriers to visitation, particularly with siblings. There was general agreement among stakeholders that diligent efforts are not being made to ensure frequent visitation among siblings. Some stakeholders noted that visitation with parents is not a component of the case plan and this results in inconsistent visitation. Stakeholder also indicated that if there is a need for supervised visits, they are not likely to occur with sufficient frequency because of staff shortages.

***Determination and Discussion:*** Item 13 was assigned an overall rating of Area Needing Improvement because in 32 percent of the applicable cases, reviewers determined that the agency had not made concerted efforts to ensure that visitation between parents and children and between siblings was of sufficient frequency to meet the needs of the child. The key concern identified in the case reviews and by stakeholders is that BCFS is not making diligent efforts to promote visitation among siblings.

According to the Statewide Assessment, visits between children and families are court-ordered in all cases where it is appropriate and the court is beginning to order visits of longer duration and greater frequency. However, the distance between a child’s placement and the parent’s community sometimes impedes visitation. The Statewide Assessment notes that visits are supervised by BCFS staff or by private providers under contract with BCFS.

The Statewide Assessment also notes that for siblings not placed together, maintaining ties is impeded by distances. Children placed in treatment level or residential care often are placed at considerable distance from their siblings.

#### **Item 14. Preserving connections**

Strength       Area Needing Improvement

**Review Findings:** Item 14 was applicable for assessment in 30 of the 31 foster care cases. One case was not applicable for assessment because reviewers determined that the child, who was an infant removed from the mother at birth, did not have any connections that needed to be preserved. In assessing item 14, reviewers were to determine whether the agency had made, or was making, diligent efforts to preserve the child's connections to neighborhood, community, heritage, family, faith, and friends while the child was in foster care. The assessment resulted in the following findings:

- Item 14 was rated as a Strength in 19 (63%) of the 30 applicable cases.
- Item 14 was rated as an Area Needing Improvement in 11 (37%) of the 30 applicable cases.

Ratings for this item varied across localities. The item was rated as a Strength in 75 percent of Portland cases, compared to 50 percent of Lewiston and Biddeford cases.

Reviewers indicated that in 19 of the 30 cases, children's primary connections had been “significantly” preserved while they were in foster care; in 8 of the 30 cases, children’s primary connections had been “partially” preserved; and in 3 of the 30 cases, children’s primary connections were “not at all” preserved.

Item 14 was rated as a Strength when reviewers determined that the agency had made diligent efforts to preserve the child’s primary connections with extended family or former foster parents. In two cases, reviewers noted that the agency also made efforts to preserve the child’s connections to school and community. The item was rated as an Area Needing Improvement when reviewers determined that the agency had not made diligent efforts to preserve the child's connections with former foster parents or extended family (9 cases), and/or with the child’s cultural heritage (3 cases).

Stakeholders commenting on this issue noted that BCFS generally attempts to maintain children’s connections to extended family, although connections to community are somewhat difficult to maintain because of the scarcity of placement resources in some communities. However, some stakeholders voiced concern that high caseloads make it difficult for social workers to attend to the importance of connections for children.

A few stakeholders reported that there is a lack of consistency regarding BCFS' compliance with the Indian Child Welfare Act (ICWA). Some stakeholders suggested that notification of Tribes is inconsistent or tardy, while other stakeholders said that it is timely and routine. Stakeholders also said that when children are in long-term foster care, the Tribes have to advocate for visits with family members, although this does not happen with short-term placements.

**Determination and Discussion:** Item 14 was assigned an overall rating of Area Needing Improvement because in 37 percent of the cases, reviewers determined that the State had not made diligent efforts to preserve children's connections.

### Item 15. Relative placement

\_\_\_\_\_ Strength       X   Area Needing Improvement

**Review Findings:** All 31 foster care cases were applicable for an assessment of item 15. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to locate and assess relatives (both maternal and paternal relatives) as potential placement resources for children in foster care. The results of this assessment were the following:

- Item 15 was rated as a Strength in 14 (45%) of the 31 applicable cases.
- Item 15 was rated as an Area Needing Improvement in 17 (55%) of the 31 applicable cases.

Although performance with regard to this indicator was not high in any of the sites included in the onsite CFSR, the item was rated as a Strength in 62 percent of Biddeford cases, compared to 43 percent of Lewiston cases and 37.5 percent of Portland cases.

Item 15 was rated as a Strength when the child's current placement was noted to be with a relative (2 cases), or when reviewers determined that the agency had made diligent efforts to search for both maternal and paternal relatives when appropriate (12 cases). The item was rated as an Area Needing Improvement when reviewers determined that the agency: (1) had not made diligent efforts to search for either maternal or paternal relatives (11 cases), (2) had sought maternal but not paternal relatives (3 cases), or (3) had sought paternal but not maternal relatives (3 cases).

Stakeholders commenting on this item reported a recent increase in BCFS' focus on seeking relatives as placement resources. Stakeholders noted that, although there had been some reluctance in the past to using relatives as placement resources because of the perception that relatives would have the same parenting issues as biological parents, this attitude has changed recently and relatives

are now being sought on a more routine basis. However, stakeholders also noted that although State policy has shifted, at some local levels the necessary changes in attitudes and perceptions have not yet taken place.

**Determination and Discussion:** Item 15 was assigned an overall rating of Area Needing Improvement because in 55 percent of the cases, reviewers determined that the agency had not made diligent efforts to locate and assess relatives as potential placement resources.

According to the Statewide Assessment, BCFS policy regarding relative placement and kinship care gives relatives priority consideration as a resource when children are ordered into custody. Social workers are required to inform the court at the time of the summary preliminary hearing about the availability of relatives to care for the child. Relative caregivers are encouraged to become licensed foster parents. Nevertheless, if a relative chooses not to be licensed and is assessed as capable of providing safe care, he/she can be approved to receive State-funded (non IV-E) board and care payments.

As noted in the Statewide Assessment, the State Data Profile shows that only 5.8 percent of all children in foster care are placed in relative homes. This is consistent with case review findings that children were in relative placements in 2 (6%) of the 31 foster care cases. The BCFS has made increasing the numbers of children placed in relative care a Reform Initiative priority.

#### **Item 16. Relationship of child in care with parents**

Strength                       Area Needing Improvement

**Review Findings:** An assessment of item 16 was applicable for 20 of the 31 foster care cases. A case was considered not applicable for an assessment of this item if (1) parental rights had been terminated prior to the period under review and parents were no longer involved with the child, or (2) a relationship with the parents was considered to be not in the child's best interests. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to support or maintain the bond between children in foster care and their mothers and fathers. The results of this assessment were the following:

- Item 16 was rated as a Strength in 17 (85%) of the 20 applicable cases.
- Item 16 was rated as an Area Needing Improvement in 3 (15%) of the 20 applicable cases.

Item 16 was rated as a Strength when reviewers determined that BCFS had made concerted efforts to promote the relationship between the child and his or her parents, in some cases even after TPR. Item 16 was rated as an Area Needing Improvement when reviewers determined that BCFS had not made diligent efforts to promote the child's relationship with parents.

Some stakeholders commenting on this issue expressed concern that contact between parents and children is not sufficient to ensure maintenance of the parent-child bond. However, other stakeholders reported that parents and children generally visit once a week, and that BCFS attempts to promote the bond through providing parenting education services and modeling appropriate parenting.

**Determination and Discussion:** Item 16 was assigned an overall rating of Strength because reviewers determined that in 85 percent of the applicable cases, BCFS had made concerted efforts to support the parent-child relationships of children in foster care.

### III. CHILD AND FAMILY WELL-BEING

#### Well-Being Outcome 1

<b>Outcome WB1: Families have enhanced capacity to provide for their children’s needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Lewiston</b>	<b>Portland</b>	<b>Biddeford</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	4	11	6	21	42.0
Partially Achieved:	6	6	8	20	40.0
Not Achieved or Addressed:	2	7	0	9	18.0
Not Applicable:	0	0	0		

#### STATUS OF WELL-BEING OUTCOME 1

Maine did not achieve substantial conformity with Well-Being Outcome 1. This determination was based on the finding that the outcome was rated as substantially achieved in 42.0 percent of the cases reviewed, which is less than the 90 percent required for a determination of substantial conformity.

The CFSR case reviews revealed that BCFS was not consistently effective with regard to assessing needs and providing services to children, parents, and foster parents (item 17), or involving children and parents in case planning (item 18). The most significant concern identified, however, pertained to the lack of face-to-face contact between social workers and the children in their caseloads. In 70 percent of the cases, reviewers determined that the frequency and quality of social worker contacts with children was not sufficient to ensure their safety or well-being. In all of these cases, contacts with children occurred less frequently than once a month, and in most cases, social workers typically made contact with children once every 3 months. In addition, case reviewers determined

that in a substantial percentage of cases, when social workers did make contact with children, the contacts did not focus on issues pertinent to case planning, service delivery, and goal attainment.

Findings pertaining to the specific items assessed under Well-Being Outcome 1 are presented and discussed below.

### **Item 17. Needs and services of child, parents, foster parents**

Strength       Area Needing Improvement

**Review Findings:** An assessment of item 17 was applicable for all 50 cases. In assessing this item, reviewers were to determine whether the agency had (1) adequately assessed the needs of children, parents, and foster parents; and (2) provided the services necessary to meet those needs. The results were the following:

- Item 17 was rated as a Strength in 33 (66%) of the 50 applicable cases (22 of which were foster care cases).
- Item 17 was rated as an Area Needing Improvement in 17 (34%) of the 50 applicable cases (9 of which were foster care cases).

Foster care cases were more likely to receive a rating of Strength for this item (71%) than were in-home services cases (58%). In addition, the item was rated as a Strength in 79 percent of Biddeford cases, compared to 67 percent of Portland cases and 50 percent of Lewiston cases.

Item 12 was rated as a Strength when reviewers determined that the needs of children, parents, and foster parents had been adequately assessed and that identified service needs had been met. This item was rated an Area Needing Improvement when reviewers determined one or more of the following:

- Children's needs were not assessed (4 cases).
- Needed services were not provided to children (6 cases).
- Services were provided but were not appropriate to the child's needs (6 cases).
- Parents' needs were not assessed (10 cases).
- Needed services were not provided to parents (12 cases, in 2 cases services were provided to one parent but not the other).
- Foster parent's needs were not assessed (2 cases).
- Needed services were not provided to foster parents (2 cases).

A key issue identified in the case reviews was that children and families in cases in which sexual abuse was an issue often did not receive adequate assessments related to sexual abuse and, consequently, did not receive the services necessary to address this problem.

Stakeholders commenting on this item expressed the opinion that comprehensive assessments are being done on children and families at the point of the initial contact with the family and that there are a variety of assessment techniques. However, they also noted that the assessment is not always used as the basis for the case plan and for determining services. In addition, stakeholders reported that social workers do not always conduct assessments on an ongoing basis to track the progress of the family or the child. Stakeholders also were in general agreement that the scarcity of services in many areas of the States is a key challenge to ensuring that children, parents, and foster parents receive adequate and appropriate services and supports. In addition, several stakeholders suggested that regular foster parents do not routinely receive the same high level of services and supports that are provided to or available to therapeutic foster parents.

***Determination and Discussion:*** Item 17 was assigned an overall rating of Area Needing Improvement because in 34 percent of the cases, reviewers determined that BCFS had not adequately assessed and/or addressed the service needs of children, parents, and foster parents. A key concern identified pertained to the finding that, in several cases, either services were not provided to children, or the services provided were not sufficient to meet their needs.

According to the Statewide Assessment, Maine offers a wide array of services to children and families. The Statewide Assessment also indicates that while most birth parents report that they were able to receive the services they needed, they also noted that waiting lists and lack of accessibility in rural areas were obstacles to timely engagement in services.

As indicated in the Statewide Assessment, BCFS contracts for retention and support services to foster families through Adoptive and Foster Families of Maine. The services provided through this contract include a liaison program, newsletter and web-page, training, an allegation support team, and specialized staff for foster/adoptive family problem-solving and advocacy.

#### **Item 18. Child and family involvement in case planning**

Strength       Area Needing Improvement

***Review Findings:*** An assessment of item 18 was applicable for 44 of the 50 cases. Six foster care cases were not applicable for assessment because TPR had been attained prior to the period under review, the child was not old enough to participate, and/or the child was not in placement with pre-adoptive parents. In assessing this item, reviewers were to determine whether parents (including pre-adoptive parents or permanent caregivers) and children (if age-appropriate) had been involved in the case planning process, and if not, whether their involvement was contrary to the child's best interest. A determination of involvement in case planning required that



a parent or child had actively participated in identifying the services and goals included in the case plan. This assessment produced the following findings:

- Item 18 was rated as a Strength in 25 (57%) of the 44 cases (17 of which were foster care cases).
- Item 18 was rated as an Area Needing Improvement in 19 (43%) of the 44 cases (8 of which were foster care cases).

Foster care cases were slightly more likely to receive a rating of Strength for this item (68%) than were in-home services cases (52%). There was little variation in ratings across localities.

Item 18 was rated as a Strength when reviewers determined that all appropriate parties had actively participated in the case planning process. The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Mothers who should have been involved in case planning were not involved (11 cases).
- Fathers who should have been involved in case planning were not involved (8 cases).
- Children who were old enough to have been involved in case planning were not involved (10 cases).

Stakeholders had mixed perceptions of the involvement of parents and children in the case-planning process. Some stakeholders suggested that children and parents are fully involved in the case-planning process and that case plans are updated with parents every 3 months. In contrast, other stakeholders reported that social workers tend to present parents with a list of things that they have to do rather than working with them to decide on the plan. Some stakeholders expressed the opinion that often, the Family Service Plans are given to parents and attorneys at the first court hearing and the parent may not have seen the plan prior to that time.

***Determination and Discussion:*** Item 18 was assigned an overall rating of Area Needing Improvement based on the finding that in 43 percent of the cases, reviewers determined that BCFS had not made diligent efforts to involve parents and/or children in the case planning process.

According to the Statewide Assessment, revised BCFS policy stresses a collaborative approach among agency social workers, parents, children (when appropriate), and service providers in the development of the case plan. The Statewide Assessment notes that roughly two-thirds of parents who were surveyed for the Statewide Assessment reported that they were satisfied with the case planning process and were involved in the development of their child's case plan. The Statewide Assessment also notes that BCFS staff and representatives of the legal and judicial community who were interviewed as part of the Statewide Assessment process reported that, although improvements are still needed, BCFS has made progress in effectively engaging parents in developing the case plan.

## Item 19. Worker visits with child

\_\_\_\_ Strength      \_\_X\_\_ Area Needing Improvement

**Review Findings:** All 50 cases were applicable for an assessment of item 19. In conducting this assessment, reviewers were to determine whether the frequency of visits between social workers and children was sufficient to ensure adequate monitoring of the child's safety and well-being, and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The results of the assessment were the following:

- Item 19 was rated as a Strength in 15 (30%) of the 50 cases (10 of which were foster care cases).
- Item 19 was rated as an Area Needing Improvement in 35 (70%) of the 50 cases (21 of which were foster care cases).

Ratings for this item varied slightly as a function of type of case, with 32 percent of foster care cases rated as a Strength for this item compared to 26 percent of in-home services cases. Ratings of Strength for this item were infrequent in all sites included in the onsite CFSR.

Reviewers noted the following with respect to frequency of social worker contacts with children for the 31 foster care cases:

- In 2 cases, visits typically occurred twice a month.
- In 8 cases, visits typically occurred once a month.
- In 21 cases, visits typically occurred less than monthly.

Reviewers noted the following with respect to frequency of visits for the 19 in-home services cases:

- In 1 case, visits typically occurred monthly.
- In 18 cases, visits typically occurred less than monthly.

Item 19 was rated as a Strength when reviewers determined that the frequency and quality of visits between social workers and children was sufficient to ensure adequate monitoring of the child's safety and well-being and promote attainment of case goals. For the most part, this required at least monthly visitation, although in two cases, less than monthly visitation was deemed sufficient.

This item was rated as an Area Needing Improvement when reviewers determined the following:

- The frequency of social worker visits was not sufficient to meet the needs of the child, but when visits did occur, they focused on issues pertinent to case planning, service delivery, and goal attainment (24 cases).

- The frequency of social worker visits was not sufficient to meet the needs of the child, and visits did not focus on issues pertinent to case planning, service delivery, and goal attainment (11 cases).

Stakeholders commenting on this item agreed that social workers do not make regular visits to children except to conduct the 3-month well-being and safety assessments for children in foster care. Stakeholders noted that barriers to more frequent contact are caseload sizes and the geographic distance of some placements. In addition, stakeholders reported that there is no policy regarding social worker contact with children in in-home services cases. Instead, workers tend to rely on contracted service providers to monitor children’s safety and well-being.

**Determination and Discussion:** Item 19 was assigned an overall rating of Area Needing Improvement based on the finding that in 70 percent of the cases, reviewers determined that social worker visits with children were not of sufficient frequency and/or quality. A key finding was that even when social workers did make contact with the children, in many cases the quality of this contact was determined to be insufficient to address issues pertaining to the child’s safety or well-being.

According to the Statewide Assessment, BCFS policy prescribes the frequency and nature of visits between social workers and children in all placements. The Statewide Assessment notes that visits for family foster care placements are frequent for the first 6 weeks, then occur every 6 weeks, or more often as the circumstances demand. At least every 3 months, each child in out-of-home placement is seen for a well-being and safety review, which requires specific observations and explorations by the social worker to ascertain the child’s safety and well-being in placement. Compliance with this policy is tracked monthly and recently reported to be complied with for 95 percent of children in care. This is consistent with stakeholder’s perceptions that social workers view the 3-month well-being and safety review as fulfilling the visitation requirement with the child.

## Item 20. Worker visits with parents

Strength       Area Needing Improvement

**Review Findings:** An assessment of item 20 was applicable for 40 of the 50 cases. Ten foster care cases were not applicable for assessment because TPR had been attained prior to the period under review and the parents were no longer involved with the child. Reviewers were to assess whether the social worker’s face-to-face contact with the children’s mothers and fathers was of sufficient frequency and quality to promote attainment of case goals and/or ensure the children’s safety and well being. The results of this assessment were the following:

- Item 20 was rated as a Strength in 16 (40%) of the 40 cases (10 of which were foster care cases).
- Item 20 was rated as an Area Needing Improvement in 24 (60%) of the 40 cases (11 of which were foster care cases).

This item was slightly more likely to be rated as a Strength in the foster care cases (48%) than in the in-home services cases (32%). There was little variation in ratings across localities.

Typical patterns of social worker visits with mothers were the following (34 applicable cases):

- Weekly visits – 1 case (which was not a foster care case).
- Twice a month visits - 1 case (which was a foster care case).
- Monthly visits – 7 cases (5 of which were foster care cases).
- Less than monthly visits – 25 cases (10 of which were foster care cases).

Typical patterns of social worker visits with fathers were the following (30 applicable cases):

- Twice a month visits – 1 case (which was a foster care case).
- Monthly visits - 6 cases (3 of which were foster care cases).
- Less than monthly visits - 21 cases (10 of which were foster care cases).
- No visits – 2 case (neither of which were foster care cases).

Item 20 was rated as a Strength when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children and that visits focused on issues pertinent to case planning, service delivery, and goal attainment. The item was rated as an Area Needing Improvement when reviewers determined the following:

- Visits were not occurring with sufficient frequency, but when they did occur, they focused on substantive issues pertaining to the case (11 cases).
- Visits were not occurring with sufficient frequency, nor did they focus on substantive issues pertaining to the case such as case planning, service delivery, and goal attainment (13 cases).

Stakeholders commenting on this item generally indicated that the frequency of social worker visits with parents tends to vary among social workers. Stakeholders reported that there is no clear agency policy in this regard, and social workers tend to rely on contracted service providers to monitor families and ensure children's safety and well-being.

***Determination and Discussion:*** Item 20 was assigned an overall rating of Area Needing Improvement because in 60 percent of the applicable cases, reviewers determined that the frequency and/or quality of social worker visits with parents were not sufficient to monitor the safety and well-being of the child or promote attainment of case goals. A key concern identified was that even when contacts with parents occurred, in many cases the contact was brief and cursory and did not address issues pertaining to the child's safety, permanency, or well-being.

According to the Statewide Assessment, parental contact to construct a case plan is required within 30 days of a child’s commitment, with subsequent reviews that are to involve parents at least every 3 months.

**Well-Being Outcome 2**

<b>Outcome WB2: Children receive appropriate services to meet their educational needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Lewiston</b>	<b>Portland</b>	<b>Biddeford</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	6	17	11	34	89.5
Partially Achieved:	0	1	1	2	5.3
Not Achieved or Addressed:	1	1	0	2	5.3
Not Applicable:	5	5	2	12	

**STATUS OF WELL-BEING OUTCOME 2**

Maine achieved substantial conformity with Well-Being Outcome 2 based on the finding that 89.5 percent of the cases reviewed were determined to have substantially achieved this outcome, which substantively meets the 90 percent required for substantial conformity.

A key CFSR finding was that BCFS makes concerted efforts to assess children's educational needs and provide appropriate services to meet those needs.

The findings for the item assessed for Well Being Outcome 2 are presented below.

**Item 21. Educational needs of the child**

Strength       Area Needing Improvement

**Review Findings:** An assessment of item 21 was applicable for 38 of the 50 cases reviewed. Cases that were not applicable for assessment included those in which the children were not of school age or did not have needs pertaining to education-related issues.

In assessing this item, reviewers were to determine whether children's educational needs were appropriately assessed and whether services were provided to meet those needs. The results of this assessment were the following:

- Item 21 was rated as a Strength in 34 (89%) of the 38 applicable cases (26 of which were foster care cases).
- Item 21 was rated as an Area Needing Improvement in 4 (11%) of the 38 applicable cases (1 of which was a foster care case).

Item 21 was rated as a Strength when reviewers determined that all educational needs were assessed and addressed as appropriate. The item was rated as an Area Needing Improvement when reviewers determined that educational needs were not assessed and educational services were not provided.

Stakeholders commenting on this issue were in general agreement that BCFS is effective in meeting children’s educational needs and that schools are responsive to the needs of children in foster care.

**Determination and Discussion:** Item 21 was assigned an overall rating of Strength because in 89 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to meet the educational needs of children.

According to the Statewide Assessment, BCFS maintains an interagency agreement with the Department of Education, Division of Special Education, which governs roles, responsibilities and procedures for all students within the care and custody of BCFS. Education is a mandatory component of case planning and encompasses life-skills training for older youth in care. The BCFS provides financial assistance to post-secondary school students seeking higher training and education. A tuition waiver program allows certain youth in custody to matriculate in the State’s university system.

### Well-Being Outcome 3

<b>Outcome WB3: Children receive adequate services to meet their physical and mental health needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Lewiston</b>	<b>Portland</b>	<b>Biddeford</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	7	16	12	35	72.9
Partially Achieved:	1	4	1	6	12.5
Not Achieved or Addressed:	2	4	1	7	14.6
Not Applicable:	2	0	0		

### STATUS OF WELL-BEING OUTCOME 3

Maine did not achieve substantial conformity with Well-Being Outcome 3. This determination was based on the finding that the outcome was rated as substantially achieved in 72.9 percent of the 48 applicable cases, which is less than the 90 percent required for a determination of substantial conformity.

A key CFSR finding is that BCFS is effective in meeting children's physical health needs, but is less consistently effective in meeting children's mental health needs. Key concerns identified pertained to a lack of accessibility of mental health services. Both the case reviews and information from stakeholder interviews indicate that many children in BCFS caseloads have mental health service needs that are not being addressed.

Findings pertaining to the specific items assessed under Well-Being Outcome 3 are presented and discussed below.

## **Item 22. Physical health of the child**

Strength       Area Needing Improvement

**Review Findings:** An assessment of item 22 was applicable for 41 of the 50 cases reviewed. Cases that were not applicable for this assessment were in-home services cases in which physical health concerns were not an issue. In assessing this item, reviewers were to determine whether (1) children's physical health needs had been appropriately assessed, and (2) the services designed to meet those needs had been, or were being, provided. The findings of this assessment were the following:

- Item 22 was rated as a Strength in 35 (85%) of the 41 applicable cases (29 of which were foster care cases).
- Item 22 was rated as an Area Needing Improvement in 6 (15%) of the 41 applicable cases (2 of which were foster care cases).

Item 22 was rated as a Strength in 93 percent of the foster care cases compared to 60 percent of the in-home services cases. There was little variation in ratings for this item across localities included in the onsite CFSR.

The item was rated as a Strength when reviewers determined that children's health needs were routinely assessed and services provided as needed. This item was rated as an Area Needing Improvement when reviewers determined the following:

- The child did not receive appropriate screenings and preventive health or dental care while in foster care (1 case).
- The child did not receive a medical screening at the time of the initial agency contact, although sexual abuse was substantiated (3 cases).
- The child in an in-home services case did not receive needed medical treatment/services (2 cases).

Stakeholders commenting on this item reported that BCFS is effective in meeting children’s health needs, both for preventive services and treatment when necessary. However, stakeholders identified a problem accessing dentists who will accept Medicaid payments, indicating that this is a barrier to obtaining dental services, particularly orthodontics, for foster children.

**Determination and Discussion:** Item 22 was assigned an overall rating of Strength based on the finding that in 85 percent of the applicable cases, reviewers determined that BCFS had adequately addressed children’s health needs. A key finding, however, is that children who were substantiated victims of sexual abuse did not receive appropriate medical screenings.

According to the Statewide Assessment, all children in foster care participate in the Preventive Health Program. Policy establishes expectations and timeframes for initial and periodic screening, prevention, diagnosis, treatment, and supportive health services. The BCFS collects child and family health histories and documents the preventive, acute, and chronic health services for all children in care. Medical information is kept in the case record and in portable records provided to caretakers. The records are updated as changes occur.

### **Item 23. Mental health of the child**

Strength       Area Needing Improvement

**Review Findings:** An assessment of item 23 was applicable for 45 of the 50 cases reviewed. Cases that were not applicable were those in which the child was too young for an assessment of mental health needs, or mental health needs were not the reason for agency contact with the child. In assessing this item, reviewers were to determine whether (1) mental health needs had been appropriately assessed, and (2) appropriate services to address those needs had been offered or provided. The findings of this assessment were the following:

- Item 23 was rated as a Strength in 33 (73%) of the 45 applicable cases (23 of which were foster care cases).
- Item 23 was rated as an Area Needing Improvement in 12 (27%) of the 45 applicable cases (6 of which were foster care cases).

Ratings for this item varied slightly as a function of case type, with the item rated as a Strength in 81 percent of the foster care cases compared to 62 percent of the in-home services cases. Variation across localities was more extensive; the item was rated as a Strength in 92 percent of Biddeford cases, compared to 70 percent of Lewiston cases and 64 percent of Portland cases.



Reviewers determined that children’s mental health needs were “significantly” assessed in 34 cases, “partially” assessed in 10 cases, and “not at all” assessed in 1 case. Reviewers determined that mental health service needs were “significantly met” in 29 cases, “partially met” in 10 cases, and “not at all met” in 1 case.

Item 23 was rated as a Strength when reviewers noted that children’s mental health needs were both "significantly" assessed and mental health service needs were “significantly” met, or when mental health was “partially” assessed, but identified needs were “significantly” met. The item was rated as an Area Needing Improvement when reviewers determined the following:

- Children with identified mental health service needs did not receive ongoing mental health treatment (6 cases).
- No mental health needs assessment was conducted, although the evidence suggested that an assessment was warranted (6 cases).

Stakeholders commenting on the issue of mental health assessments and services for children expressed differing opinions. Some stakeholders suggested that obtaining mental health services is not problematic, while others voiced concern that children have to wait long periods of time for mental health services even after they have been assessed and specific needs have been identified. State-level stakeholders reported that the State legislature recently passed a law that the Department of Human Services cannot take children into custody solely for the purpose of accessing mental health services. They noted that it is not yet known what impact this law will have on mental health services for children in foster care.

***Determination and Discussion:*** Item 23 was assigned an overall rating of Area Needing Improvement based on the finding that in 27 percent of the applicable cases, reviewers determined that BCFS was not effective in addressing the children’s mental health needs. The concerns identified pertained to both assessments and service provision.

According to the Statewide Assessment, services to children with behavioral and mental health problems are an area of major concern for the State. An effort to develop in-State treatment beds resulted in reducing the number of children placed out-of-State in institutional settings from 231 in 1999 to 70 in 2003. A court settlement was reached between the Departments of Behavioral and Developmental Services and the Department of Human Services for the provision of more timely in-home and support services to hundreds of affected children. The State has tripled the number of children receiving mental health services since 1997, and has built an in-home service structure for thousands that did not exist in the mid-90’s. Nevertheless, there is general agreement that more progress is needed in expanding less-restrictive options for treatment within the State.

As noted in the Statewide Assessment, the new Governor’s administration has proposed merging the Departments of Behavioral and Developmental Services and the Department of Human Services, within which BCFS sits. The Statewide Assessment expresses the hope that such a merger will improve service array and delivery to children and families in need of treatment and support, but also a

concern that this major effort might consume management and frontline staff, possibly having a negative impact on the Reform Initiative currently underway within BCFS.

**SECTION 2: SYSTEMIC FACTORS**

**IV. STATEWIDE INFORMATION SYSTEM**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
Rating	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
	1	2	3 X	4

Maine achieved substantial conformity with the systemic factor of statewide information system. Information pertaining to the item addressed for this factor is provided below.

**Item 24. State is operating a Statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding months, has been) in foster care.**

  X   Strength           Area Needing Improvement

This item is rated as a Strength because the Maine Automated Child Welfare Information System (MACWIS) meets the requirements for identifying the status, demographic characteristics, location, and placement goals for children in foster care.

According to the Statewide Assessment, MACWIS was implemented in May of 1998. It meets the Federal requirements and captures data elements for both AFCARS and NCANDS. The system provides immediate access to case information Statewide, 24 hours a day, 365 days a year. It is supported by a help desk and “stand by” assistance around the clock. MACWIS collects and manages information using seven major modules: intake, assessment, case management, resources, administration, eligibility, and finance. The case management module contains all case-related information such as goals, placement history, service history, judicial information, medical/health information, demographics, child plans, narratives, and all other AFCARS-required elements.

Information in the Statewide Assessment indicates that MACWIS is a very stable system, although it was noted that not all data are entered in a timely or complete manner. Stakeholders interviewed as part of the State’s self-assessment process expressed the opinion

that there are some redundancies in the system, and voiced concern that time spent entering information is time that cannot be spent working with clients. The Statewide Assessment also notes that staff surveyed as part of the State’s self-assessment process reported that key strengths of the system are its ability to track individual cases and the fact that it provides access to case information for social workers, supervisors, and managers.

Stakeholders commenting on the Statewide information system during the onsite CFSR were in general agreement that MACWIS can track the demographics, location, goals, and legal status for all children in foster care. However, some stakeholders voiced concern about the accessibility of information and the quality of reports generated by the system.

The positive aspects of MACWIS identified by stakeholders included the following:

- There are no barriers to accessing information and users have 24 hour a day access.
- The system has case-specific historical information that social workers can easily access.
- Data entry is typically up-to-date.
- Tickler reports are valuable for supervisors and social workers to track due/overdue items.

Key concerns expressed by stakeholders about MACWIS were the following:

- Case information is readily accessible but is fragmented in such a way that social workers must access multiple sources to get the “whole picture” on a case.
- The quality of reports is questionable, particularly with regard to accuracy of information.
- The usefulness of management reports is questionable.
- There are difficulties generating outcome data and extracting court information.
- MACWIS is not available to the staff in the Attorney General’s office, thus inhibiting communication and collaboration with that agency.

## V. CASE REVIEW SYSTEM

<b>Rating of Review Team Regarding Substantial Conformity</b>				
	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
Rating	1	2X	3	4

The State of Maine is not in substantial conformity with the systemic factor of Case Review System. Information pertaining to the items assessed for this factor is provided below.

**Item 25. Provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions.**

Strength       Area Needing Improvement

Item 25 was rated as an Area Needing Improvement because both case reviews and stakeholder interviews indicate that case plans are not routinely developed in collaboration with parents.

According to the Statewide Assessment, BCFS policy mandates that a case plan be completed within 60 days of a child's removal from home, and updated at least every 6 months thereafter. By policy, case planning must involve parents, children (when appropriate), and professionals providing services to the family. The case plan must contain all of the required elements, including the appropriate life skills and independent living elements for youth age 16 and over, and be approved by the supervisor. The Statewide Assessment notes that the development of the child's case plan is integrated into the Child Well Being and Safety Assessment process, so that current case plans reflect the most recent assessment of needs, services, goals, and timeframes.

The Statewide Assessment also notes that, according to Statewide data, case plans are completed within required timeframes 89 percent of the time. In addition, two-thirds of parents surveyed for the Statewide Assessment reported satisfaction with the case planning process and their inclusion in that process.

Stakeholders commenting on case plans and the case planning process during the onsite CFSR were in general agreement that children have case plans. However, there were differences of opinion with regard to parental involvement in the development of the case plan. Several stakeholders reported that most social workers meet with parents to develop the case plan, often in the context of team meetings. They also praised many social workers for engaging non-custodial fathers in this process. In contrast, other stakeholders expressed the opinion either that social workers do not involve parents in case planning or that the level of parental involvement depends on the stage of the case process. These latter stakeholders suggested that parental involvement increases as evaluations are conducted and recommendations are made. CFSR case reviewers determined that parents and children were involved in case planning in only 57 percent of the 44 applicable cases.

Stakeholders also expressed concerns about the quality of the case plans. While some noted that case plans are individualized, others commented that the case plans are not outcome-oriented and lack detail.

**Item 26. Provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review.**

Strength       Area Needing Improvement

Item 26 was rated as a Strength because existing policy, procedures and court protocols ensure that the status of every child is reviewed by the court or administrative review board at least once every 6 months.

According to the Statewide Assessment, the Maine Legislature amended the Child and Family Services and Child Protection Act (the State law governing child protection proceedings) to conform to the ASFA requirements. This legislation transferred responsibility for conducting 6-month reviews from BCFS to the District Courts. However, the responsibility for ensuring that court reviews occur in a timely manner remains with BCFS. Social workers and supervisors rely on “prompts” or ticklers from MACWIS to alert the Assistant Attorneys General when reviews are due. Written case updates are provided to all parties prior to the review.

As indicated in the Statewide Assessment, BCFS holds Administrative Case Reviews (ACR) for any case that will not be heard by the court within the required 6-month time frame to ensure that Federal requirements for case reviews are met. Additionally, ACRs are held annually for any child whose permanency goal is long-term foster care, in order to review the compelling reasons that justify this placement.

Stakeholders participating in the onsite CFSR were in agreement that case reviews are taking place at least every 6 months and sometimes more often. Stakeholders observed that agency and court procedures contributed to timely scheduling and hearings. These procedures included: (1) the MACWIS ticklers that remind social workers that a review is forthcoming, (2) the use of a case management system by the courts, and (3) the court practice of discouraging continuances.

**Item 27. Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.**

Strength       Area Needing

Item 27 was rated as an Area Needing Improvement because, although there is a process in place for holding permanency hearings as required, the effectiveness of the hearings is insufficient to promote the timely achievement of permanency for children in foster care.

According to the Statewide Assessment, the Maine Supreme Court adopted a Case Management Procedure for child protection cases in 1999. The purpose of this procedure was to ensure that the court meets its obligation under State and Federal law to give timely and thorough attention to child welfare cases. The procedure calls upon judges to actively direct the course of child protection litigation through conferences and hearings. Timeframes mandated by State and Federal law are identified in the procedure, including the need to hold a preliminary protection hearing within 7-14 days, issue a jeopardy order within 120 days, conduct a judicial review every 6 months, and hold a permanency planning hearing within 12 months. As noted in the Statewide Assessment, BCFS policy conforms to the ASFA requirement that permanency hearings occur for each child within 12 months of entering care, and annually thereafter. Compliance is triggered through MACWIS alerts and tracked by the Quality Assurance staff.

The Statewide Assessment indicates that there is agreement from surveyed casework staff that permanency hearings are, for the most part, occurring Statewide. However, as noted in the Statewide Assessment, judges and defense attorneys believe that BCFS sometimes moves too slowly, is inadequately prepared for the hearings, or is over-focused on timeframes. Some of these stakeholders noted that the timeframes are unrealistic for families with substance abuse issues.

Stakeholders interviewed regarding this issue during the onsite CFSR were in general agreement that 12-month permanency hearings are held in a timely manner. Stakeholders expressed the opinion that the agency and the courts make concerted efforts to meet federal timeframes. However, stakeholders usually described the 12-month hearing as an *ad hoc* or *pro forma* process, noting that discussions regarding permanency occur outside the courtroom and that the main purpose of the hearing is to review decisions that have already been made. Stakeholders also reported that, in terms of content, the permanency hearings are not always distinguishable from the 6-month reviews. There is a tendency to combine the 6-month reviews with permanency hearings. This results in a focus on progress since the last review, rather than on the permanency outcomes for children who are the subject of the reviews.

**Item 28. Provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act.**

Strength       Area Needing Improvement

This item is rated as an Area Needing Improvement. Although appropriate procedures are in place to pursue TPR for children in foster care in accordance with ASFA provisions, there are many barriers to the effective operation of these procedures, resulting in frequent delays in achieving timely TPR.

According to the Statewide Assessment, in accordance with the Maine’s Supreme Court Case Management Procedure for child protection cases, in all court locations, to the extent possible, each case is heard by a single judge, who actively directs the course of the litigation from preliminary protection hearing, through jeopardy orders, judicial reviews, and permanency hearings. The Case Management Procedure recognizes BCFS’ requirement to file for TPR when a child has been in foster care for 15 of the most recent 22 months unless a statutory exception applies.

Stakeholders commenting on this issue during the onsite CFSR were in general agreement that procedures are in place for TPR in accordance with ASFA timeframes. Stakeholders reported that once permanency decisions are made, TPRs are being filed in a timely manner. However, stakeholders also identified court-related barriers to achieving TPR, such as getting a signed court order from the District Court, scheduling a TPR hearing (which can take up to 3-4 months), and having TPR hearings “bumped first” from an over-filled docket. Some stakeholders indicated that, rather than pursuing TPR, the courts and the agency often give parents additional time to work toward reunification even when the evidence suggests that reunification is unlikely. Finally, stakeholders expressed the opinion that exceptions to TPR may not be properly documented by the agency.

**Item 29. Provides a process for foster parents, preadoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child.**

Strength       Area Needing Improvement

Item 29 is rated as an Area Needing Improvement because the State is not consistent with regard to the notification of foster parents, pre-adoptive parents, and relative caregivers regarding reviews or hearings, and the courts are not consistent in ensuring opportunities for these caretakers to provide input into the reviews or hearings.

According to the Statewide Assessment, policy requires that written notice be given to foster, relative, and pre-adoptive caregivers prior to administrative and judicial reviews, and permanency hearings. Information in the Statewide Assessment indicates that between April and November of 2002, compliance with this policy varied from 41 percent to 86 percent across the State, according to the Quality Assurance unit. Only 50 percent of foster parents surveyed for the Statewide Assessment reported that they were notified of court hearings, and only 10 percent indicated that there has been an improvement in the area of notification.



Most stakeholders commenting on this issue during the onsite CFSR expressed the opinion that foster parents are routinely notified about court hearings, although a few stakeholders suggested that some caretakers, including Native American caretakers, are not notified consistently or are notified too late to prepare adequately. Most stakeholders also were in general agreement that participation of foster parents in the hearings depends on the judge and whether or not foster parents are granted “intervenor” status in the hearings. Stakeholders reported that some judges recognize foster parents and elicit their input, but other judges do not. A few stakeholders observed that foster parents may not participate in the hearings because they are intimidated by the court setting, although other stakeholders suggested that social workers discourage foster parents from participating.

## VI. QUALITY ASSURANCE SYSTEM

Rating of Review Team Regarding Substantial Conformity				
	Not in Substantial Conformity		Substantial Conformity	
Rating	1	2X	3	4

Maine is not in substantial conformity with the systemic factor of Quality Assurance System. Information pertaining to the items assessed for this factor is provided below.

### **Item 30. The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children.**

Strength       Area Needing Improvement

Item 30 is rated as an Area Needing Improvement because of BCFS’ inconsistency in responding to maltreatment reports in a timely manner, particularly in responding to reports of maltreatment by foster parents or facility staff. Although BCFS has made improvements in recent years in the timeliness of response to maltreatment reports, CFSR findings indicate that there continue to be problems with regard to responding to timely responding to these reports.

According to the Statewide Assessment, licensing standards for all non-therapeutic and therapeutic foster homes and facilities were recently updated and distributed to all providers in the State. Requirements include on-going training, CPR certification, criminal

background checks, home studies or facility inspections, and fire inspections. Licensing social workers located in district offices throughout the State ensure compliance with regulations. Program standards for treatment foster care have also been recently revised. The Quality Assurance unit reviews and monitors services provided to children in treatment foster care.

The Statewide Assessment also notes that, in addition to ensuring compliance with licensing regulations and program standards, BCFS requires social workers to conduct Child Well-being and Safety reviews for all children in foster care on a quarterly basis. These reviews ensure that the child's safety and well-being needs are being appropriately met by the caregivers. An independent unit, the Community Services Center Abuse unit, investigates allegations of abuse and neglect in foster care homes and facilities. If abuse, neglect, or licensing violations are indicated during an investigation, the findings are forwarded to BCFS' Licensing Unit for sanctions. Information in the Statewide Assessment indicates that representatives of child-placing agencies reported that BCFS is effective in establishing and maintaining standards for child placement agencies.

Stakeholders commenting on this issue during the onsite CFSR indicated that the State has established standards to ensure that children in foster care are provided quality services. Stakeholders noted key practices to monitor children's safety and well-being, including: (1) quarterly safety and well-being assessments conducted by social workers, and (2) monthly reviews of a random sample of cases conducted by local Quality Assurance units. However, State-level stakeholders expressed concern with the quality and documentation of the quarterly safety and well-being visits. They also noted that in some cases these visits are not occurring and in some cases, the visits may be the only contact that social workers have with children in foster care.

Finally, State-level stakeholders reported that there is a lack of formal policy for responding to child maltreatment reports by foster parents or facility staff. They noted that although the timeliness of response to these allegations has improved over the past few years, it still takes about one week to initiate an investigation, even in high-risk cases.

**Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the CFSP are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.**

Strength       Area Needing Improvement

Item 31 is rated as a Strength because the State operates an identifiable quality assurance system that is used for agency self-monitoring.

According to the Statewide Assessment, the Quality Assurance (QA) Unit within BCFS consists of a reviewer assigned to each of the State’s eight Districts and a central supervisor. The QA unit conducts ongoing assessments of compliance and performance across all areas of policy and practice, both internally and for contracted providers. The unit conducts reviews, studies, and special projects for BCFS management, as well as preparing data reports. The QA unit is responsible for quarterly reports to the Health and Human Services Committee of the Maine State Legislature.

The Statewide Assessment indicates that the QA unit ensures compliance with ASFA by conducting monthly reviews of a statistically valid sample of all types of cases. Case-specific concerns are tracked for resolution by QA staff. Reports generated from these studies are used by program administrators and BCFS management staff to evaluate compliance with policy and to ensure delivery of high-quality services.

As noted in the Statewide Assessment, the QA unit also reviews the case files of children with Long-Term Foster Care (LTFC) Agreements. The unit assesses the permanency plan, poses questions to clarify the appropriateness of the plan for the child, and makes recommendations. QA reviewers also assess compliance with the requirement that every child age 16 and older in foster care has an Independent Living Plan that is specific to the child’s needs and that is updated on a regular basis.

The QA Unit has additional duties, including: (1) conducting quality reviews of Community Intervention Program agencies; (2) reviewing intakes to ensure appropriate referrals; and (3) conducting follow-up, targeted studies of special populations. QA staff also conduct appeals of substantiated cases to comply with CAPTA regulations.

Stakeholders commenting on this issue during the onsite CFSR expressed the opinion that the State operates an identifiable QA system that is used for agency self-monitoring. Stakeholders stated that reports derived from the internal QA system are used for multiple purposes, such as reviewing the quality of casework, identifying issues of concern (e.g., improving response times), monitoring compliance, and providing feedback. State-level stakeholders commenting on the system observed that QA is largely concerned with compliance with agency policy and procedures, and suggested that greater attention should be placed on assessing the quality and effectiveness of the services provided.

**VII. TRAINING**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
Rating	1	2	3 X	4

Maine achieved substantial conformity with the systemic factor of training. Information pertaining to the items assessed for this factor is provided below.

**Item 32. The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services.**

Strength       Area Needing Improvement

Item 32 is rated as an Area Needing Improvement because, although the State has established a pre-service training program for all new staff, the training does not adequately prepare new social workers to perform basic aspects of their jobs.

According to the Statewide Assessment, training for BCFS staff is provided by Maine’s Department of Human Services Staff Education and Training Unit, and the Child Welfare Training Institute (i.e., a collaboration between the University of Southern Maine/Muskie School for Public Service and BCFS). All new social workers and hires are required to complete a 5-week program that was described in the Statewide Assessment as intensive, holistic, and competency-based. The training combines centralized and web-based learning experiences that have been jointly developed by trainers and supervisors. Upon completion of formal training, new staff are expected to have familiarity with basic policy, law, social work competencies, and the dynamics of abuse and neglect within families.

As noted in the Statewide Assessment, respondents to a survey conducted for the State’s self-assessment said that social workers may leave training with basic child welfare knowledge, but they are not fully prepared for the realities of the job. These respondents recommended greater integration of training with on-the-job activities such as job shadowing and field practice, and additional training regarding the role of the social worker in court proceedings.

Most stakeholders commenting on this issue during the onsite CFSR expressed the opinion that the pre-service training covers a wide range of issues but does not sufficiently prepare social workers to do their job. According to various stakeholders, pre-service training is too theoretical and more “nuts and bolts” training is needed, as many social workers leave training “without knowing the basics.” However, stakeholders acknowledged the difficulty of providing new social workers with field experience during pre-service training. They noted that job shadowing is helpful, but it is not consistently implemented across the State. According to stakeholders, this is a particular concern because not all social workers have bachelor’s degrees in social work and yet many assume a full caseload immediately after training. Stakeholders also cited the need for greater training on court procedures, along with ongoing training and support with MACWIS.

Despite these concerns, stakeholders noted that for the most part, social workers do not carry caseloads until they complete training. However, a few stakeholders suggested that sometimes supervisors may permit social workers to carry cases before they complete training if they are already licensed social workers. In addition, stakeholders in Biddeford indicated that social workers usually receive substantial caseloads the day they come back from the training.

Stakeholders also reported that supervisors can take a graduate level supervisor course at the University of Maine and that all current supervisors have taken this course.

**Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.**

Strength       Area Needing Improvement

Item 33 is rated as a Strength because the State requires and supports ongoing training for staff through the provision of extensive training opportunities in collaboration with the Child Welfare Training Institute.

According to the Statewide Assessment, BCFS staff are required by law to be licensed as social workers, and training and professional development plans are a mandatory element in performance appraisals. After completing the core pre-service training, staff development continues through an ongoing training program. Each year, the Staff Training Committee identifies priority learning objectives and prepares a training outline to support achieving desired competencies. MACWIS training is included in ongoing staff development, along with child welfare topics.

The Statewide Assessment also notes that ongoing training includes a program called Innovations to Child Welfare Practice. This program, which was created with input from outside stakeholders, combines training in state-of-the-art practice methods with new policy, law, and standards. Recent sessions included training on (1) updated child and family assessment tools, (2) interviewing methods, and (3) Federal child welfare legislation (including ASFA, Indian Child Welfare Act, and the Multi-Ethnic Placement Act). A particular focus of the Innovations to Child Welfare Practice program is to build on the strengths of the supervisory staff within the agency to promote new ideas and best practice.

Information in the Statewide Assessment indicates that, in addition to training, BCFS maintains a Field Instruction Unit for BSW and MSW students who agree to work with BCFS for 1 year after graduation. These students complete a pre-service curriculum during

their internship. BCFS also supports a wide variety of professional development activities including onsite MSW courses, tuition reimbursement, field placement options within child welfare, mentoring by community providers, books, journals, memberships in professional organizations, and enrollment in outside workshops. Training time and resources are also allotted to district offices and supervisors so that needs identified outside of the training plan can be addressed as they arise.

Stakeholders commenting on ongoing staff training during the onsite CFSR were in general agreement that BCFS provides extensive ongoing training for social workers. Stakeholders noted that all agency social workers must be licensed and fulfill 36 hours of annual training and that the State has a wide array of training options available to meet this requirement (e.g., special agency initiatives, “design your own” training, interdisciplinary conferences, local seminars, etc.). However, a few stakeholders indicated that newer supervisors are not as knowledgeable as they need to be, and their lack of knowledge affects social worker actions and the consistency of case decisions. State-level stakeholders noted that staff and supervisors need greater training on permanency planning, adoption, independent living, sexual abuse identification and treatment, legal issues, and court procedures.

With respect to ICWA, stakeholders reported that mandatory, statewide training has been effective. Stakeholders noted that this training was developed by BFCS in collaboration with the Tribes.

**Item 34. The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.**

Strength       Area Needing Improvement

Item 34 was rated as a Strength because the State requires and supports pre-service and ongoing training for foster and adoptive parents and other caretakers through a variety of traditional and innovative methods.

According to the Statewide Assessment, the State requires 24 hours of competency-based pre-service training for all individuals seeking to become foster or adoptive parents. Once licensed, family foster care providers must complete 24 hours of in-service training on a bi-annual basis to maintain a license. Therapeutic or specialized foster care providers must complete 48 hours of training bi-annually. Training is provided through the BCFS/CWTI collaboration. In-service training needs are identified in each District in conjunction with the Training Advisory Committee of the Adoptive and Foster Family of Maine. Two statewide BCFS coordinators routinely audit pre-service training classes to provide feedback to trainers. The curriculum also is used by 12 private child-placement agencies.

Information in the Statewide Assessment indicates that foster and adoptive parents complete a self-assessment of strengths and needs (along with assessments conducted by trainers, licensing and casework staff) that is used to create a professional development plan. Training needs are met through a wide array of offerings, which are recommended by the Training Committee, CWTI, and BCFS. As noted in the Statewide Assessment, the annual in-service training catalog reflects course offerings that balance theory and application. CWTI staff use multiple methods to continuously enhance and improve the training curricula, such as course evaluations, follow-up telephone surveys, and public focus groups. They also observe in-service training programs to evaluate quality.

The Statewide Assessment reports that surveys and evaluations conducted in 1999 and 2000 reported favorable findings regarding retention of training content by foster parents. These studies also indicated that participation in training was a significant predictor of foster parent retention. Surveys and focus groups conducted for the Statewide Assessment revealed that most trainees felt that pre-service training was good and that on-going trainings were helpful, although they lacked sessions to prepare foster/adoptive parents to work with the system. Child care and travel were consistently noted as barriers to accessing training.

Most stakeholders commenting on this issue during the onsite CFSR were in general agreement that the agency provides quality training to foster parents. They described the mandatory training as “good” and “comprehensive,” noting that there is a wide array of training opportunities available. However, other stakeholders indicated that the training does not give a realistic view of foster parenting.

Some stakeholders suggested that more-experienced foster parents should be able to “test-out of training” and that the number of required training hours for regular and therapeutic foster parent licensing is too high and imposes a hardship, particularly because transportation and child care are barriers to participation. Other stakeholders pointed out that there are many creative approaches in place to allow flexibility and individually-tailored training experiences. It was noted that foster parents can use books, videos, web-based training, correspondence training, and annual conferences to meet the ongoing training requirements. Other training practices that stakeholders described as particularly noteworthy are:

- Conducting competency-based assessments of foster parents.
- Requiring both foster parents to attend training (i.e., “Not just the Mom”).
- Offering a training catalogue to make selections.
- Assigning mentors to new therapeutic foster parents.
- Providing a variety of ways to access training

## VIII. SERVICE ARRAY

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
		1	2 X	3

Maine did not achieve substantial conformity with the systemic factor of service array. Information on the items assessed for this factor is presented below.

**Item 35. The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency.**

Strength       Area Needing Improvement

Item 35 is rated as an Area Needing Improvement. Although there is a wide array of services in place, there are service gaps in key areas that affect the achievement of permanency and well being for children.

According to the Statewide Assessment, despite the fact that State funds earmarked for the expansion of in-home, reunification, and kinship care initiatives have not been made available, BCFS provides access to a wide array of services and programs. Available services include: home family therapy, time limited reunification services, psychological evaluations, substance abuse evaluations, attachment evaluations, mental health counseling, in-patient and out-patient substance abuse counseling, Al-Anon groups, anger management classes, psychiatric services, family foster care, treatment foster care, residential services, parenting education, family violence programs, sexual abuse treatment teams, sexual assault support groups, batterer’s treatment, non-offenders groups, sexual offender assessment and counseling, interpreter services, transportation, supervised visitation, childcare, homemaker services, Early Head Start, domestic violence and homeless shelters, and case management. In addition to these established services and programs, two additional programs are being piloted within the State: (1) a comprehensive family reunification program in conjunction with Casey Family Services, and (2) a Rapid Evaluation Program.

The Statewide Assessment notes that there are gaps in services and areas where services are not readily available. Key service gaps include dental services (dentists who will accept Medicaid), quality mental health services delivered by professionals trained in abuse



and neglect issues, sexual offender evaluations and treatment services, and services to support reunification. Information in the Statewide Assessment indicates that BCFS has worked with Casey Strategic Consulting group to realign resources through the enhancement of community-based services and the rebuilding of the foster care network.

Most stakeholders commenting on this issue during the onsite CFSR expressed the opinion that although a wide array of services is available in Maine to assess the strengths and needs of children and address their identified service needs, there are service gaps in many key areas. Some of the services noted as readily available were the following:

- General assessments, screenings, and evaluations (including in-home evaluations)
- Case management
- Parenting education
- Intensive home-based services
- Transportation for parents to access services
- Community mental health services
- Independent living services, including scattered-site supervised apartments for youth

However, stakeholders identified the following gaps in critical services:

- Sexual abuse examinations
- Sexual abuse treatment (for victims and offenders)
- Counseling services other than community mental health services
- Dental and orthodontic care through Medicaid
- Psychiatric services for children (including an on-call psychiatrist or therapist for foster parents to talk with when issues arise)
- Substance abuse assessments and treatment services
- Residential drug treatment facilities that would allow parents and children to stay together (e.g., older mothers and children, fathers and children)
- In-home services for children on trial home visits
- Family preservation services
- Child care
- Respite services for foster parents
- Visitation services
- Housing assistance for families
- Foster homes in general, but particularly “regular” (i.e., non therapeutic) foster homes and foster homes that are in children’s community of origin and school district.

- Foster homes that can accommodate siblings
- Supportive services to foster parents to prevent disruptions

Although some stakeholders mentioned the need for more post-adoption services, others noted that Maine’s IV-E Waiver Adoption Guides program has been instrumental in increasing the pool of skilled adoption therapists through Statewide training initiatives. Also, the Adoption Guides program is testing whether case-management for adoptive families is a cost-effective method for delivering effective adoption supports and services. Stakeholders noted that BCFS earmarks additional funds for families receiving adoption assistance. Adoptive parents can request up to \$2000 annually to meet needs for their children that are not covered in a subsidy agreement.

Among the more serious service gaps identified by stakeholders is the lack of mental health services for children who do not require residential placement. Stakeholders noted that the public mental health system is better able to accommodate children whose mental health needs require out-of-home placement than it is to meet children’s needs for home- and community-based mental health services. BCFS has had to create an alternative array of services from private providers to meet the mental health needs of children in their communities. However, this effort has not been able to meet the needs of all children.

**Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State’s CFSP.**

Strength       Area Needing Improvement

Item 36 is rated as an Area Needing Improvement because accessibility to services varies by geography and the willingness of health care (physical, dental, and mental) providers to accept Medicaid. In addition, long waiting lists for some services impede the timely delivery of services to parents and children.

According to the Statewide Assessment, Maine is a rural state, and despite the extensive array of services, families report that they may need to travel many miles to obtain some services. Waiting lists also impede timely access to services.

Stakeholders commenting on this item during the onsite CFSR generally expressed the opinion that the service array varies by geography. They expressed concern with the availability of, and access to, services in rural areas, pointing out that lack of transportation in rural areas is a significant barrier to accessing services. State-level stakeholders indicated that it is very difficult to

access dental and orthodontic care throughout the State because providers do not accept Medicaid. They also noted difficulty in accessing psychiatrists through Medicaid, expressing concern for children who require medication maintenance.

In addition to these concerns, the majority of stakeholders expressed great frustration with the prevalence of waiting lists, echoing the concerns raised in the Statewide Assessment. Stakeholders emphasized that waiting lists are a major barrier to effective service delivery across the State. They reported that there are long waiting lists for assessments (e.g. psycho-sexual, parental capacity, independent living, home study), and this situation is compounded by the length of time it takes to receive results. Stakeholders also identified numerous waiting lists for contracted services (e.g., individual counseling, visitation, in-home and family preservation services, in-patient substance abuse treatment, community mental health services, and comprehensive evaluations).

**Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.**

  X   Strength             Area Needing Improvement

Item 37 is rated as a Strength because BCFS offers social workers the ability to individualize services, and CFSR findings indicate that social workers make concerted efforts to meet the unique needs of children and families within the context of available services.

According to the Statewide Assessment, BCFS provides in-home family preservation, family support, and time-limited reunification services through contracts and agreements with community-based agencies. These services are flexible and designed to meet the family’s changing needs.

Stakeholders commenting on this issue during the onsite CFSR expressed differing opinions regarding the capacity of BCFS to meet the unique needs of children and families. Some stakeholders asserted that services are individualized to meet specific needs. They noted that social workers can spend up to \$250 for special services or items, can access local funds to pay private providers (e.g., therapists), and can use post-legalization (for adoptions) funds for acute situations (up to \$2,000 per year to support a specific need). In addition, some stakeholders noted that BCFS collaborates with other agencies (i.e., DHS, mental health, and corrections) to meet the needs of hard-to-serve children on a case-by-case basis. However, other stakeholders asserted that there is a limited capacity to individualize services. They pointed out that some contracted services are generic in quality, and that greater focus or specialization is needed in certain areas (e.g., the provider may not offer treatment services for a specific type of substance abuse, psychological evaluations with a parenting component, specialized in-home services, etc.).

**IX. AGENCY RESPONSIVENESS TO THE COMMUNITY**

Rating of Review Team Regarding Substantial Conformity				
	Not in Substantial Conformity		Substantial Conformity	
Rating	1	2	3 X	4

Maine is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. Information on the items assessed for this factor is provided below.

**Item 38. In implementing the provisions of the CFSP, the State engages in ongoing consultation with tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP.**

  X   Strength             Area Needing Improvement

This item is rate as a Strength because BCFS has been effective in its efforts to engage in consultation with major stakeholders in implementing the goals and objectives of the Child and Family Services Plan (CFSP).

According to the Statewide Assessment, there have been major improvements in BCFS’ capacity to communicate with, respond to, and involve stakeholders in strategic planning and policy development. Partnerships that are essential to BCFS’ operations comprise: Child Abuse Action Network, Child Death and Serious Injury Review Team, Child Welfare Advisory Committee, Wabenaki Child Welfare Coalition, Joint Standing Committee on Health and Human Services, Joint Standing Committee on Judiciary, County Child Abuse and Neglect Councils, Annual Child Welfare Conference, Child Protective Advisory Committee of the Courts, Cross Agency Collaborative, Juvenile Corrections Liaison, Law Enforcement Liaison, Treatment Network Team, Levels of Care Committee, and Youth Leadership Advisory Team.

The Statewide Assessment also notes that BCFS has created the position of Division Director for Public and Legislative Affairs. The person filling this position has responsibility for managing QA and liaisons with contracted providers, and also for facilitating communication with key public constituents, including the legislature and the media.

As noted in the Statewide Assessment, surveyed staff, providers, and legislators noted improvements in BCFS' openness to the monitoring of performance measures by stakeholders. However, some providers would like more timely responses to their feedback, and staff program administrators found that outreach is inconsistent across the regions of the State.

Stakeholders commenting on this issue during the onsite CFSP were in general agreement that the agency engages in ongoing consultation with multiple community partners, although they noted that the level of collaboration varies from District to District. State-level stakeholders cited many positive efforts, including youth involvement in planning and policy-making, the university and agency training partnership through the University of Southern Maine, regular meetings with service providers, State/Tribal agreements and liaisons, and participation in the Court's Child Protection Advisory Committee. Stakeholders also noted that BCFS has reached out to the courts to address issues regarding the timely achievement of permanency for children in foster care, resulting in a commitment from the high court to address and track these issues in the State. There also was evidence in the onsite review of a strong legislative commitment to assuring quality services for children and families through the oversight and active involvement of the Legislature's Human Services Subcommittee. These strong collaborative relationships were also evident in the three sites included in the onsite review. Local stakeholders identified strong partnerships between local child welfare agencies and law enforcement agencies and courts.

However, stakeholders identified two concerns. First, the role of Tribal representatives in CFSP planning is not clear and stakeholders expressed the need for a formal and defined forum for Tribal members to participate in this process. Second, stakeholders observed that philosophies and approaches differ among agencies and need to be reconciled. For example, the mental health system advocates for the parents and the child welfare system advocates for children, thus creating conflict with child-oriented safety and permanency goals. In addition, stakeholders pointed out that ASFA timelines for achieving permanency for children in foster care are not synchronized with substance abuse treatment timeframes. Substance abuse recovery often takes longer than the 15 months specified in ASFA.

**Item 39. The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP.**

Strength       Area Needing Improvement

This item is rated as an Area Needing Improvement because the CFSP found that BCFS' consultation with stakeholders on the development and update of the State plan is not sufficiently comprehensive.

According to the Statewide Assessment, the committees mentioned above are among those that provide input and feedback for the State Plan. In addition to groups that meet regularly for the purpose of consulting on the CFSP, APSR, and for other agency purposes, BCFS solicits input from stakeholders through focus groups and surveys, work groups, and special committees.

Several stakeholders commenting on this issue during the onsite CFSR indicated that they do not routinely get copies of the child welfare plans or reports of progress and services delivered. Also, there is a concern that while the State may be aware that it is soliciting input for the State plan from certain groups, the groups may not be aware of the purpose of the consultation. Stakeholders reported that there is a need to ensure that consultation includes the range of Tribes represented in the State, rather than just one or two Tribes.

**Item 40. The State’s services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population.**

Strength       Area Needing Improvement

Item 40 is rated as a Strength because BCFS coordinates services with other Federal or federally-assisted programs serving the same population.

According to the Statewide Assessment, BCFS and its parent agency, the Department of Human Services, maintain cooperative agreements with several other agencies to facilitate complementary interagency programming. The Statewide Assessment lists the following BCFS interagency initiatives:

- Systems Access Pilot - an MOU with the Department of Behavioral and Developmental Services to respond to children experiencing a mental health crisis.
- Public Health Nursing - an agreement to clarify roles, responsibilities and promote joint case planning for families being served simultaneously by both agencies.
- Maine State Police/CPS - a protocol that outlines the responsibilities of both the State Police and BCFS in jointly investigating child death where homicide is suspected.

The Statewide Assessment reports that DHS maintains agreements with the Department of Behavioral and Developmental Services and the Department of Corrections. These agreements govern the coordination of services for mutual clients and address issues affecting both agencies. Similarly, there are agreements in place with the Department of Education to ensure that students who are

clients of BCFS receive appropriate education and supportive services. BCFS also has entered into agreements with the Penobscot Indian Nation and with the Houlton Band of Maliseet Indians to work cooperatively toward goals of mutual interest.

Stakeholders commenting on this issue during the onsite CFSR expressed the opinion that BCFS is working intensively with other public agencies to coordinate services and benefits (i.e., education, public health, substance abuse, TANF, child care, and Medicaid). Stakeholders noted that formal entities meet regularly to coordinate services. One example cited by stakeholders is the Children’s Cabinet, which has the goal of creating one “system of care” for children who enter the child welfare system through various departments. Stakeholders noted that various interagency agreements and protocols are in place to access services and coordinate care (e.g., State and Tribal agreements, a tri-department effort among corrections, DHS, and mental health to take preventive measures for children who are at-risk of entering state custody). While recognizing that the agency is building greater community involvement, stakeholders noted the following challenges:

- Tension exists between agencies that have different philosophies or approaches to treating children’s and parents’ needs.
- A formal planning forum is needed to address inter-agency mergers and planning activities.
- The quality of State/Tribal relationships varies across Districts, thus affecting service delivery.
- Greater coordination is needed among social workers, mental health providers, and financial services to address the needs of families.

**X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION**

<b>Rating of Review Team Regarding Substantial Conformity</b>			
	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>
Rating	1	2	3 4X

Maine achieved substantial conformity with the systemic factor pertaining to Foster and Adoptive Parent Licensing, Recruitment and Retention.

**Item 41. The State has implemented standards for foster family homes and child care institutions which are reasonably in accord with recommended national standards.**

  X   Strength             Area Needing Improvement

Item 41 is rated as a Strength because the State has developed and implemented standards for alternative care providers in accordance with recommended national standards.

According to the Statewide Assessment, Maine standards for foster care, adoptive care, and child care institutions are set out in statute, rules, and policy. The same standards now apply to foster homes and adoptive homes, since the implementation of the Family Standards dual licensing/approval process in 2002. The responsibility for licensing family foster homes, special foster homes, and adoptive homes lies with BCFS. The Community Services Center licenses all residential child care facilities, child placing agencies, emergency shelters, and shelters for homeless children. All facilities, homes, and programs are licensed for two years, with the exception of child placing agencies, which are licensed annually.

The Statewide Assessment notes that Maine has made major gains in improving the timeliness of re-licensing foster homes. An OIG review conducted in November 2000 discovered 744 homes with pending applications for licensure in 2000. Maine then undertook initiatives to resolve this problem. According to the Statewide Assessment, as of November 2002, 93 percent of all homes were in full compliance with licensing standards.

As indicated in the Statewide Assessment, licensing regulations for family and specialized foster homes were most recently revised in 2002 and rules are reviewed every 3 years. Proposed changes are made with broad input from within the agency and from stakeholders and the general public. Providers surveyed for the Statewide Assessment reported that regulations are in place to ensure the safety of children in placement. They also reported that BCFS collaborates with the community in setting high standards for licensing.

Stakeholders commenting on this issue during the onsite CFSR affirmed that standards are in place. They noted that the standards have been strengthened for foster and adoptive homes. Stakeholders indicated that the enhanced trainings, monthly reviews, quarterly safety assessments, annual reviews, and bi-annual renewals have contributed to upholding high standards for licensed foster homes. However, they expressed concern that the initial licensing process is protracted and that it can take up to a year to finalize with the contracting agency. Stakeholders reported that implementation of the automated renewal process has made tracking easier, resulting in timely re-licensing checks and renewals.

**Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.**

X Strength       Area Needing Improvement



Item 42 is rated as a Strength because standards are applied to all licensed or approved foster family homes or child care institutions receiving IV-E or IVB funds.

According to the Statewide Assessment, Maine assures that standards are equitably applied to all alternative care providers and uses several methods to apply these standards. In addition to the initial licensing and subsequent re-licensing of a home or facility, social workers conduct a safety and well-being review every 3 months with each child in placement. A component of this review is an evaluation of the child's caregivers and his/her physical environment. The Quality Assurance Unit conducts ongoing case reviews to check for compliance with licensing, as well as to assess the quality of care. A Residential Program Manager within BCFS monitors compliance with program standards in residential treatment facilities. Finally, an Institutional Abuse Unit investigates maltreatment in foster and institutional care.

Stakeholders commenting on this issue for the onsite CFSR were in agreement that the standards are applied equally to relatives and non-relatives if relatives decide to become licensed foster parents. If relative caregivers choose not to be licensed, a relative/kinship home study is conducted, which includes background checks, safety assessments and social history, but does not require the fire marshal or water quality approvals.

Stakeholders observed that State law does allow some exceptions to licensing regulations (e.g., to allow siblings placements, child-specific placements, and some leeway with room sizes), but all exceptions are subject to supervisory or administrative approval. State-level stakeholders also reported differences in the application of fire safety standards by local fire marshals.

**Item 43. The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.**

Strength       Area Needing Improvement

Item 43 is rated as a Strength because criminal background clearances are required for foster and adoptive applicants by policy and routinely accomplished in a timely manner according to stakeholders.

According to the Statewide Assessment, Maine did not opt out of the requirement to conduct criminal background checks on foster/adoptive families and the staff of child care facilities. Background checks are conducted on all adults in the home. They

include Child Protective Services checks, State Bureau of Identification criminal checks, applicable out-of-state criminal checks, and Department of Motor Vehicles checks. Adoptive parents are required to be fingerprinted, as required by the Probate Court. (Foster parents are not required to be fingerprinted.) All child-care facilities are required to include criminal clearances in the personnel records for each staff member.

Stakeholders commenting on this issue during the onsite CFSR noted that criminal background checks are completed for all foster/adoptive and relative placements. Multiple checks are completed during the licensing process and during re-licensing. While the process is generally efficient, State-level stakeholders expressed concern with delays in receiving State Bureau of Investigation checks, observing that delayed responses tend to slow down the adoption process.

**Item 44. The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.**

Strength      Area Needing Improvement

Item 44 is rated as a Strength because of the numerous efforts to recruit foster and adoptive homes, although there is still a need to recruit homes who can meet the needs of the small number of children in foster care from Native American and African American backgrounds.

As noted in the Statewide Assessment, less than two percent of the State's population is minority. However, most of the State's diversity is concentrated in Portland, where there are 69 language groups represented in the local schools. There are only 25 children in care who are Native American and BCFS has successfully recruited nine Native American foster homes. The recent immigration of a large number of Somali families has focused attention on diversity issues in Maine. The BCFS contracts with the International Adoption Services Center to recruit foster families. Retention efforts are contracted with the Adoptive and Foster Families of Maine. General, targeted, and child-specific recruitment techniques are employed. Maine also recruits adoptive homes through the New England Exchange Photo Listing and AdoptUSKids.

Stakeholders commenting on this issue during the onsite CFSR indicated that the agency and the Tribes try to recruit Native American homes, and have been moderately successful with child-specific placements. However, they indicated that there are challenges in recruiting, citing lack of staff as one reason. Although State-level stakeholders cited multiple methods for recruiting foster parents in general, a targeted recruitment effort in Native American and African-American communities is lacking. Stakeholders also reported

that there is a growing Somali population in Lewiston. State-level stakeholders reported that the local BCFS administration has already begun reaching out to the Somali population, although there no children from this community are in foster care at present.

**Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.**

Strength       Area Needing Improvement

Item 45 is rated as a Strength because there is evidence that BCFS encourages and supports the placement of children across cross-jurisdictional lines.

According to the Statewide Assessment, Maine maintains an electronic photo listing/web page in conjunction with the National Adoption Exchange. Children in need of homes are listed on the Northern New England Exchange and AdoptUSKids. If the listings do not bring responses within two or three months, child-specific recruitment is undertaken. Special needs adoption agencies in other states may be directly contacted if other methods do not produce results. Maine has also used private contracting services to eliminate geographical barriers. Agency staff have received training on electronic recruitment and the AdoptUSKids webpage. Approximately 7 percent of Maine’s children freed for adoption have been placed across jurisdictional lines.

Stakeholders commenting on this issue during the onsite CFSR noted that the agency is effective in using cross-jurisdictional resources, particularly in neighboring States. They noted that the agency uses multiple venues to secure adoptive resources and permanent placements. However, some stakeholders expressed concern with accessing information through the ICPC and raised questions about the quality of the ICPC in other States.