

**MARYLAND CHILD AND FAMILY SERVICES REPORT
2004-2009**

WORK PLAN

Work Plan Detail - Priority 1 –Research, Design and Implement a Family-Center Practice Framework						
ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
1.1	1.1: Develop a family-centered practice framework, which includes family engagement, family team meetings, concurrent permanency planning, family involvement of all family members and community involvement.	1.1.1: Conducted thorough literature review on models of best practice.	PIP Family Center Practice Committee	Safety Permanence Well Being	Started this activity on 08/22/2005. Workgroup reviewed literature on comprehensive assessment (federal paper), different models of Family Team Meetings and reviewed psychosocial assessment tools that are being used in Idss.	Completed
		1.1.2 Consulted with NRC on the development of the Family-Centered Practice model	PIP Family Center Practice Committee	Safety Permanence Well Being	Consultation with NRC on Family-Centered Practice	Completed
		1.1.3 Identified Phase I Implementation Sites (Phase I Sites)--Baltimore City (South East), Cecil, and Anne Arundel Counties	Out-of-Home-Unit	Safety Permanence Well Being	Phase I implementation has begun.	.

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		1.1.4 Consult with the NRC for Family-Centered Practice and Permanency Planning and the NRC on Child Protective Services to assess current policies and practices as it relates to comprehensive assessment throughout the life of the case; and make necessary revisions	Steve Berry In-home Service	Safety	Consultation with NRC has taken place	Completed
		1.1.5: Defined Family-Centered Practice—review literature provided by NRC FC & PP	PIP Family Center Practice Committee	Safety Permanence Well Being	Literature review has been completed	Completed
		1.1.6: Researched and compared national models of Family-Centered Practice.	PIP Family Center Practice Committee	Safety Permanence Well Being	Research and comparisons have been completed	Completed
		1.1.7: Established key elements and strategies for FCP framework – to include team decision making, self evaluation, building community partnerships, and recruitment, development and support of resource families	PIP Family Center Practice Committee	Safety Permanence Well Being	Key elements and strategies have been completed	Completed

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		1.1.8: Established statewide practice standards	PIP Family Center Practice Committee	Safety Permanence Well Being	Statewide practice standards have been established	Completed
		1.1.9: Facilitated regular meetings with Phase I Sites to discuss lessons learned as well as facilitate the planning and implementation process	PIP Family Center Practice Committee	Safety Permanence Well Being	Regular meetings with Phase I sites continue to take place	On-going
		1.1.10: Provided additional funds to Phase I Sites to assist in implementation	C. White	Safety Permanence Well Being	Additional funding provided to Phase I sites	Completed
		1.1.11: Phase I Sites developed implementation plans	PIP Family Center Practice Committee	Safety Permanence Well Being	All Phase I sites developed implementation plans	Completed
		1.1.12: Phase I Sites begin implementation	PIP Family Center Practice Committee	Safety Permanence Well Being	Implementation begun in all Phase I sites	Completed
		1.1.13 Monitor Phase I Sites	Out-of-home Services Unit	QA	Regular monitoring of Phase I sites is taking place	On-going

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		1.1.14 Continued to offer genograms training through the UM training program.	Child Welfare Academy	Safety Permanence Well Being Training	Training incorporated into Child Welfare Academy Training program	On-going
		1.1.15 Make necessary adjustments to practice framework	PIP Family Center Practice Committee	Safety Permanence Well Being		
		1.1.16 Develop statewide implementation plan	PIP Family Center Practice Committee	Safety Permanence Well Being		
		1.1.17 Execute implementation plan	Out-of-home Services Unit	Safety Permanence Well Being		
		1.1.18 Monitor State family centered practice model through site and regional meetings	Out-of-home Services Unit QA Unit	Safety Permanence Well Being QA		

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		1.1.19: Disseminate guidelines on the use of local Flex Funds to maintain and support family connections	Child and Family Services	Safety Permanence Well Being	Circular Letter developed around the use of flex funds	Completed
1.2	1.2: Increase supervisors' capability of using supervisory conferences to mentor and provide clinical supervision.	1.2.1: Developed clinical supervision guidelines	PIP Family Center Practice Committee	Safety Permanence Well Being	Clinical supervision guidelines were developed	Completed
		1.2.2: Partnered with and Support Supervisory Program that is provided by UM SSW	PIP Family Center Practice Committee	Safety Permanence Well Being	Continue partnership with UM SSW	On-going
		1.2.3: Meet with Child Welfare Training committee to discuss enhancing supervisor training	Child Welfare Academy	Safety Permanence Well Being Training	Continue to meet regularly with UM SSW	On-going
		1.2.4 Incorporate enhancements into offered trainings by the Child Welfare Academy	Child Welfare Academy	Safety Permanence Well Being Training		

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1.3	1.3: Implement Concurrent Permanency Planning beginning in Phase I Sites	1.3.1: Identify child welfare staff to interface with Child Support Enforcement and draft written procedures for child welfare staff	Out-of-Home-Unit	Permanence Well Being Adoption	Circular Letter developed regarding procedures on interfacing with Child Support Enforcement	Completed
		1.3.2: Worked with NRC FC & PP to conduct hands on consultation with LDSS staff	Out-of-Home-Unit	Permanence Well Being	Consultation with NRC has taken place	Completed
		1.3.3: Developed statewide strategies to address barriers to implementation	Out-of-Home-Unit	Permanence Well Being	Strategies to address barriers have been developed	Completed
		1.3.4 : Implement strategies to address barriers	Out-of-Home-Unit	Permanence Well Being		
		1.3.5: Include trends and best practices on concurrent planning in the Child Welfare Academy trainings	Out-Home Placement CHILD WELFARE ACADEMY	Permanence Well Being Adoption Training		

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1.4	1.4: Increase supports to youth in care	1.4.1: Trained available caseworkers on the IL assessing youth skills and identifying services youth need to transition into adulthood	Out-of-Home-Unit	Permanence Well Being IL	June 3, 28, & 29 and Dec. 6-8 NRC YD trained trainers on the Casey Ansell Assessment life skill tool.	Completed
		1.4.2: Trained available foster parents on the IL services youth need to transition into adulthood	Out-of-Home-Unit and J. Eveland	Permanence Well Being IL	4/17/06 Regional Training on the Easter Shore for Foster Parents on Independent Living	Completed
		1.4.3: Trained IL available private providers on the IL services youth need to transition into adulthood	Out-of-Home-Unit	Permanence Well Being IL Training	3/31/06 Train MARFY agencies 4/13/06 Train Children's Choice Agencies	Completed
		1.4.4: Trained available Youth by providing an Annual Teen Conference	Out-of-Home-Unit	Permanence Well Being IL Training	Teen conference held on 7/9/05 and 7/14/06. Next Teen Conference to take place on 7/19/07 and 7/20/07	On-going
		1.4.5: Developed and disseminate Youth Handbook	Out-of-Home-Unit and Youth Advisory Board	Permanence Well Being IL	6,000 Handbooks have been distributed and more are in the printing process.	On-going

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		1.4.6: Partnered with Youth Advisory Board for youth to speak at foster parent orientation groups	Out-of-Home-Unit and Youth Advisory Board	Permanence Well Being IL Foster Parent Recruitment/Retention	Continue to partner with YAB	On-going
		1.4.7: Trained available BCDSS staff on IL services to special needs children (NRCYD).	Out-of-Home-Unit	Permanence Well Being IL Training		
		1.4.8: Strengthen local & state Youth Advisory Boards by providing leadership development training	Out-of-Home-Unit	Permanence Well Being		
		1.4.9: Increase Youth Advisory Board members' participation in child welfare policies and practices	Out-of-Home-Unit	Permanence Well Being		
1.5	1.5: Increase sibling placements and connections	1.5.1: Reviewed and revise policy related to sibling placement and sibling visitation.	Out-of-Home-Unit	Permanence Well Being	Memo and directive sent to LDSS regarding sibling placement and visitation	Completed

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		1.5.2: Required caseworkers to document in the case record why siblings are not placed together.	Out-of-Home-Unit	Permanence Well Being	Memo to LDSS directors sent regarding this requirement	Completed
1.6	1.6: Increase permanency in formal kinship care	1.6.1: Held focus groups with relatives to identify barriers related to adoption and guardianship, and what supports kinship caregivers require. Groups held in 4 large KINSHIP Care jurisdictions (BCDSS, Montgomery, Anne Arundel and Howard counties).	Out-of-Home-Unit	Permanence Well Being	Focus group held in Montgomery Co on 3/1/06 Focus group held in Baltimore City on 8/9/07 Focus groups held at Statewide Kinship Care Conference on 9/22/07	On-going
		1.6.2: Consulted with NRC regarding increasing permanency for children in kinship care.	Out-of-Home-Unit	Permanence Well Being	Consultation with NRC has taken place	Completed
		1.6.3: Reviewed Chafee and ASFA regulations as they pertain to children who are in kinship care to ensure state policy and state plan reflects federal regulations.	Out-of-Home-Unit	Permanence Well Being		Completed

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		1.6.4: Developed Fact Sheet regarding permanency options for kin to be distributed to LCDSS and Kinship Care Resource Center	Out-of-Home-Unit	Permanence Well Being	Fact sheet has been developed	Completed
		1.6.5: Continued to fund Kinship Care Resource Center	Out-of-Home-Unit	Permanence Well Being	Funding continues	On-going
		1.6.6: Held Kinship Care Conference for both formal and informal caregivers	Out-of-Home-Unit	Permanence Well Being	Kinship Care Conference held on 9/29/07	On-going
		1.6.7: Continue to fund subsidized guardianship program.	Out-of-Home-Unit	Permanence Well Being	FY 2007 Governor’s budget provided funds to continue subsidized guardianship for those who participated in the wavier project as well as provided an increase in the rate	Rate increase starts July 1, 2006
1.7	1.7: Review, Revise, and develop policies that support Family-Centered Practices	1.7.1: Revised policy to ensure safety and risk issues are assessed and addressed prior to case closure and that linkages to community resources are made—disseminated any policy changes	In-Home-Unit	Safety Permanence Well Being	Memo sent to LDSS regarding Policy letter: Clarification of Case Closure	Completed

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		1.7.2: Revised policy to require caseworker visits with parents for both in-home and out-of-home (OH) cases as well as caseworker visits with children in OHP.	In-Home-Unit and Out-of-Home-Unit	Safety Permanence Well Being	Circular letter developed regarding guidelines for visiting	Completed
		1.7.3: Created contact sheet within MDCHESSIE	J. Gallagher	Safety Permanence Well Being	Contact sheet developed	Completed
		1.7.4: Reviewed and revise policies related to Aftercare Services and the development of aftercare service plans.	Out-of-Home-Unit	Safety Permanence Well Being	Circular letter developed	Completed
		1.7.5: Drafted and submitted legislation to remove LTFC and PFC from State law and add APPLA.	Out-of-Home-Unit	Permanence		Completed
		1.7.6: Developed and utilized APPLA Review Teams to monitor appropriate use of APPLA	Out-of-Home Unit	Permanence Well Being		
		1.7.7: Developed and disseminated a manual on diligent search for permanent connections	Out-of-Home Unit	Permanence Well Being		

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1.8	1.8: Provide training to support Family-Centered Practice	1.8.1: Continued the Risk-Based Service Planning Training. This Training is part of competency training for all staff and is offered as needed by University of Maryland. This training is included in the current training contract	In-Home Unit	Safety		Training is provided on an ongoing basis by the UM
		1.8.2: Trained available workers on using the SAFE-CGRP safety assessment for children in group care.	Out-of-Home-Unit & Steve Berry	Safety		Continue providing training. Training responsibilities for this course transferred from SSA program staff to UM in Fall 2006.
		1.8.3: Provided training on the importance of sibling placement and family connections to available LDSS OHP staff.	Out-of-Home-Unit & Resource Development Unit	Safety		On-going
		1.8.3a Provide training on family connections to available foster parents.		Permanence		On-going
		1.8.4: Received feedback from NRC on Family-Centered Practice training held at University of Maryland School of Social Work	Out-of-Home Placement Unit	Well Being		Received and reviewed feedback from NRC on Family-Centered Practice training
				Training		

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		1.8.5:Identified trainings that will be offered through the Child Welfare Training Academy- Created a training plan	Resource Development Unit	Safety Permanence Well Being Training	Training plan created	Completed
1.9	Trained on the policy that defines limited use of emergency shelter placements to limit the number of placements a child experiences.	1.9.1: Conduct training on policy.	Out-of-Home-Unit	Safety Permanence		On-going
		1.9.2: Monitor use of policy	Out-of-Home-Unit	Safety Permanence		On-going
1.10	Ensure SSA and LDSS staff understand the Indian Child Welfare Act.	1.10.1: Consulted with NRCs and NICWA on ICWA –specifically the requirements related to early identification of American Indian heritage and tribal notification.	Out-of-Home Unit	Safety Permanence Well Being ICWA		
		1.10.2: Incorporated questions related to American Indian heritage into screening and assessment tools.	Family Centered Practice Committee	Safety Permanence Well Being ICWA		

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		1.10.3: Establish communication plan and contact with Tribal Organizations	Out –of-Home Unit	Safety Permanence Well Being ICWA		
		1.10.4: Sent memorandum to LDSS regarding ICWA requirements and Tribal contacts.	Out –of-Home Unit	Safety Permanence Well Being ICWA		
		1.10.4: Establish Native American Foster/Adoptive parent support groups	Resource Development Unit	Safety Permanence Well Being ICWA		
		1.10.5: Include Native Americans in evaluation of home study process to ensure cultural sensitivity	Resource Development Unit	Safety Permanence Well Being ICWA		

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		1.10.6: Ensured that ICWA is included in new worker training and Practice.	Child Welfare Academy	Safety Permanence Well Being Training ICWA		
1.11	Conduct a Differential Response System Study	1.11.1: Establish workgroup for Study	In-Home Unit	Safety Permanence Well Being		
		1.11.2: Workgroup to review materials and best practices on Differential Response		Safety Permanence Well Being		
		1.11.3: Develop the concept of differential and how such a system would appear in Maryland – to include all the requirements outlined in HB 1648		Safety Permanence Well Being		

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		1.11.4: Submit Report on Study		Safety Permanence Well Being		
		1.11.5: Determine whether and how to implement recommendations from study		Safety Permanence Well Being		

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2.1	Provide training and regional meetings for Judiciary and attorneys on CFSR and court related issues.	2.1.1: Collaborated with Court Improvement Project and the NRC on Legal and Judicial Issues to assist with regional meetings and training.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety	Collaborated with FCCIP and NRC	Completed
				Permanence		
		2.1.2: DHR staff presented as part of panel CSFR findings, concurrent planning, and PIP initiatives at regional meetings		Permanence		Completed
		2.1.3 Submitted request to regularly present at annual judges meeting (October 2005, 2006) on permanency-related issues.	Legal & Court Issues Committee– Lead Adoption Unit	Permanence		On-going
		2.1.4 Submitted request to attend biennial Alternative Dispute Resolution (mediation) conference.	Legal & Court Issues Committee	Well Being		

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2.2	Develop a "Best Practices" Manual to assist the courts in establishing permanency timely in CINA, related TPR and Adoption matters. The Manual will address: Continuances; Permanency for children ages 10 and older; Early identification of parents; and other initiatives to promote timely processing of cases.	2.2.1 Convened "Best Practices" workgroup to develop standards.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety Permanence Well Being Training	Workgroup developed standards	Completed
		2.2.2 Explored best practices for establishing timely and appropriate permanency goals	Legal & Court Issues Committee--	Permanence Well Being	List of Permanency and Court Practices References addressing Child Abuse and Neglect Issues that were reviewed, considered and references in creating the Best Practice Manual. Ex. The One Family, One Judge and Hearing Checklist were derived from the NCJFCJ 's Resource Guidelines.	Completed
		2.2.3 Disseminated draft "Best Practice" Standards Manual to juvenile judges, masters and other CINA & TPR stakeholders who attended the annual CANDO conference	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Permanence Well Being	Draft Best Practices Manual that was distributed at the October 2005 CANDO Conference to stakeholders for review	Completed

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		2.2.4: Best Practice Standards Manual will be presented to Judges and Masters at annual CANDO conference as part of the PIP session	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety Permanence Well Being Training	CANDO Conference Agenda-Plenary Session <i>Final Program Improvement Plan</i> -included presentation on Best Practice Manual	Completed
		2.2.5: Held forum to solicit feedback from available juvenile judges, masters and other CINA & TPR stakeholders on Best Practice Manual		Safety Permanence Well Being Training		Completed
		2.2.6: Finalized and published “Best Practice” guidelines Continuances/Postponements and Permanency Planning for children ages 10 and older. Distributed electronic and hardcopies to courts.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety Permanence Well Being Training		Completed
		2.2.7 Best Practice Standards will be presented at annual judge’s conference.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety Permanence Well Being Training		On-going

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2.3	Explore ways to decrease court postponements and continuances.	2.3.1: Explored best practices for court postponements and continuances.	Foster Care Court Improvement Project- Tracy Watkins-Tribbitt.	Safety Permanence Well Being	List of References reviewed by the workgroup in developing the standards.	Completed
		2.3.2 Best Practices workgroup developed court continuance/postponement policy.		Permanence Well Being	Draft Best Practices Manual- includes The Continuance/Postponement Policy	Completed
		2.3.3: Disseminated draft policy to judges and masters for feedback	Foster Care Court Improvement Project- Tracy Watkins-Tribbitt.	Permanence Well Being	Draft Best Practices Manual that was distributed at the October 2005 CANDO to stakeholders for review	Completed
		2.3.4 Compiled feedback, revised as appropriate to finalize draft, and present before Maryland Conference of Circuit Judges.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Permanence Well Being		
		2.3.5: Finalized policy published "Best Practice Guidelines"	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety Permanence Well Being Training		

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2.4	Improve collaboration between LDSS and judiciary system to increase appropriate and timely goals.	2.4.2: Improved CHESIE LDSS Court reports to the court through collaboration with the Court Improvement Project ,the Office of the Attorney General, and DHR		Permanence Well Being		Completed
		2.4.3: Revised Uniform Court Orders to address ASFA (FCCIP has committed to revising the Uniform Court Orders).	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Permanence Well Being	Copy of Memo to County Administrative Judges about Revised Uniform Court Orders; Colored Copies of Revised Uniform Court Orders for hearings;	Completed
		2.4.4: Held regional meetings with caseworkers and local attorneys on the proper use of ASFA exception and documentation required	Legal & Courts Committee	Permanence Well Being Training		
2.5	Promote the use of Alternative Dispute Resolution (mediation) statewide. Currently there are 5 ADR programs and 7 more in various stages of development.	2.5.1: Hosted a biennial conference on the use of ADR.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Permanence Well Being		Completed
		2.5.2: Notified Courts, LDSS and other stakeholders of available Judiciary	Foster Care Court Improvement Project (FCCIP) – Tracy Watkins-Tribbitt	Permanence Well Being	Copy of FY 2006 (July 1, 2005- June 30, 2006) Notice of Funding Availability mailed to stakeholders	Completed

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		funding sources.		Training		
		2.5.3: Established partnership with the Maryland Mediation and Conflict Resolution Office.	Legal & Courts Committee	Permanence Well Being		
2.6	Review and Revise as needed Maryland's CINA and TPR Appellate Process.	2.6.1: Legal intern assessed current TPR appellate process.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety Permanence Well Being		Completed
		2.6.2: Consulted with National Child Welfare Resource Center for Organizational Improvement to discuss results of data gathered on the Maryland Appellate process	Legal & Court Issues Committee / Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety Permanence Well Being		Completed
		2.6.3 Collaborated with the Clerk of the Court of Special Appeals in examining the Appellate process.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt	Safety Permanence		On-going

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2.7	Ensure review hearings are scheduled for Baltimore City Equity Court Adoption cases not yet transferred to juvenile court.	2.7.1: Identified all cases that should have been transferred to juvenile court in 1997 that were not.	Foster Care Court Improvement Project -- (FCCIP)-Tracy Watkins-Tribbitt/ Circuit Court for Baltimore City and representatives from the Court, the Clerk's Office, the Legal Aid Bureau, and Baltimore City Department of Social Services Legal Department.	Permanence		Completed
		2.7.2: Hearing scheduled and conducted for all identified (appropriate) children.	Circuit Court for Baltimore City and representatives from the Court, the Clerk's Office, the Legal Aid Bureau, and Baltimore City Department of Social Services Legal Department.	Permanence		Completed
		2.7.3: FCCIP ensured cases identified in 2.7.2 were placed on docket	Foster Care Court Improvement Project- Tracy Watkins-Tribbitt.	Permanence		Completed
2.8	Determine the extent to which court caseloads and resource limitations affect judicial performance.	2.8.1: Conducted judicial workload assessment.	Foster Care Court Improvement Project- Tracy Watkins-Tribbitt.	Permanence		Completed

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		2.8.2: University of MD collected and analyzed data— completed a written report to FC CIP		Permanence		Completed
		2.8.3: FCCIP presented Phase I report to Chief Judge Bell		Permanence		Completed
		2.8.4: FCCIP began Phase II of judicial workload assessment.		Permanence		Completed
		2.8.5 Conducted focus groups to determine the affects on caseloads and resource limitations on judicial performance				Completed
		2.8.6 Conducted site visits to circuit courts				Completed
		2.8.7 FCCIP collaborated with the University of Maryland to develop steps for completion of the Phase II assessment report				Completed

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Work Plan Detail - Priority 2 – Improved legal and court processes will support and facilitate timely permanency for children.						
ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
2.9	Ensure the timely notification of caregivers to participate in hearings.	2.9.1: Issued memorandum emphasizing the importance and the requirement to notify parents and caregivers of hearings including TPR hearings.	Social Service Administration- Out-of-Home-Unit	Permanence	Circular letter developed regarding Foster Parent/Caregiver Notification	Completed
		2.9.2 Worked with Court Improvement Project to train judges, attorneys and LDSS staff on the requirement to notify caregivers of hearings and provide them the opportunity to be heard	Social Service Administration- Out-of-Home-Unit	Permanence		
		2.9.3 Created and issued standard letter caseworkers can use in all cases to notify caregivers	Social Service Administration- Out-of-Home-Unit	Permanence	Circular letter developed regarding Foster Parent/Caregiver Notification	Completed

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Work Plan Detail - Priority 2 – Improved legal and court processes will support and facilitate timely permanency for children.						
ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		2.9.4 Court “Best Practices” Manual Checklist encourage courts to inquire at every appropriate hearing whether foster care parent and/or caregivers were given notice.	Foster Care Court Improvement Project (FCCIP)-Tracy Watkins-Tribbitt	Permanence Training	Draft Best Practices Manual- includes The Hearing Checklist	Completed
		2.9.5 Added this matter (2.9.4) to the FCCIP Nuts and Bolts of CINA training curriculum.	Foster Care Court Improvement Project (FCCIP)-Tracy Watkins-Tribbitt	Permanence Training		Completed

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Work Plan Detail - Priority 3 – Design and implement a quality assurance system to evaluate the quality of services and measure outcomes for children and families.						
ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
3.1	Revise QA to evaluate the quality of services and to measure the outcomes of children and families.	3.1.1: Consulted with NRC on organizational improvement to access the current QA process and to assist with QA redesign.	Quality Assurance Committee –	Safety Permanence Well Being		Completed
		3.1.2: Negotiated with Citizen Review Board to create a streamlined review process that eliminates duplication	Quality Assurance Committee	Safety Permanence Well Being		Completed
		3.1.3: Incorporated CSFR measures into the QA process	Quality Assurance Committee	Safety Permanence Well Being	Maryland is using the CSFR instrument	Completed
		3.1.4: Trained available QA team on revised process	Quality Assurance Committee	Safety Permanence Well Being Training QA		On-going

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		3.1.5: Piloted revised QA process in three jurisdictions.	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.1.6: Incorporated “lessons learned” from Maryland pilot site reviews into subsequent Maryland CFSR site reviews.	Quality Assurance Committee	Safety Permanence Well Being QA	Incorporated “lessons learned” from Maryland pilot site reviews into subsequent Maryland CFSR site reviews. Child and Family Services Reviews Onsite Review Reference	Completed
		3.1.7: Submit QA results to ACF for the establishment of baselines	Quality Assurance Committee	Safety Permanence Well Being QA	CFSR Ratings for Maryland-CFSR – All 8 Jurisdictions	Completed
		3.1.8: Implemented revised QA. Reviewed 4 LDSS by January 2007. Baltimore City + 3 others.	Quality Assurance Unit	Safety Permanence Well Being QA	Reviewed Baltimore City, Wicomico Co, Cecil Co and Prince George’s Co DSS	Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		3.1.9: Established a feedback loop and plan for use of QA results in consultation with NRC OI.	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.1.10: Align QA Measures with the Child Welfare Accountability Act	Quality Assurance Committee	Safety Permanence Well Being QA		
		3.1.11: Develop State schedule for QA reviews	Quality Assurance Unit	Safety Permanence Well Being QA		Completed
		3.1.12: Conduct onsite reviews every three years for each LDSS	Quality Assurance Unit	Safety Permanence Well Being QA		On-going

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		3.1.13 Based on revised QA reviews, LDSS will be required to submit local PIP to SSA based on review findings.	Quality Assurance Committee	Safety Permanence Well Being QA		
		3.1.11: SSA will monitor LDSS PIP	Quality Assurance Unit	Safety Permanence Well Being QA	Memo to Directors, Local Departments of Social Services RE: Directive to the Local Departments of Social Services on the Statewide Implementation of the Maryland QA System, CFSR	On-going
3.2	Create a statewide Supervisory/Peer Record Review process to Supplement QA case reviews to increase supervisors' capability of using supervisory conferences to mentor and monitor case activity related to safety, permanency, and well-being outcomes.	3.2.1: Developed supervisory instrument to be used during case consultation and worker conferences based on outcomes and practice standards.	Quality Assurance Committee	Safety Permanence Well Being QA	Memo to Directors, Local Departments of Social Services RE: Directive to the Local Departments of Social Services on the Implementation of the Local Supervisory, Peer, and Citizens Review Instrument	Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		3.2.2: Included monitoring of safe case closure practices in revised/new QA case reviews.	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.2.3 Incorporated monitoring of Risk-based Service Planning documents are complete and in the case record through the revised QA process	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.2.4 Incorporated rate of repeat maltreatment, safe case closure, and service plan reviews in revised QA case review process	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.2.5 Incorporated monitoring of caseworker visits with parents for both in-home and out-of-home cases requirements into revised QA case review process	Quality Assurance Committee	Safety Permanence Well Being QA		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		3.2.6 Incorporated monitoring of the use and completion of the SAFE-CGRP assessment tool into revised QA case review process	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.2.7 Incorporated monitoring of Aftercare Service plans into revised QA case review process	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.2.8 Incorporated monitoring of appropriate use of APPLA in revised QA case review process	Quality Assurance Committee	Permanence Well Being QA		Completed
		3.2.9 Incorporated monitoring of documentation in the case record of why siblings are not placed together in revised QA case review process	Quality Assurance Committee	Permanence Well Being QA		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		3.2.10 Incorporated monitoring use of emergency shelters in revised QA case review process	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.2.11: Incorporated items/indicators related to concurrent planning into the revised QA process.	Quality Assurance Committee	Permanence Well Being QA		Completed
		3.2.12: Conducted initial training for available supervisors on the use of the instrument	Quality Assurance Committee	Safety Permanence Well Being QA	Training held on 9/11/06 & 9/12/06	Completed
		3.2.13: Based on first round of revised QA case reviews, established a baseline to determine compliance with concurrent planning policies and practices.	Quality Assurance Committee	Safety Permanence Well Being QA		

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		3.2.14: Established target improvements based on baseline and implemented performance improvement plan.	Quality Assurance Committee	Safety Permanence Well Being QA		
		3.2.15 Roll-out use of instrument in the other LDSS	Quality Assurance Unit	Safety Permanence Well Being QA		
3.3	Enhance local departments' ability to self evaluate	3.3.1 Develop Local Self Assessment Process	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.3.2: Incorporate National Standards data, Demographics, community resources and services, organizational structure, and county specific information into the local assessment process	Quality Assurance Committee	Safety Permanence Well Being QA		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		3.3.3 Piloted revised QA process in three jurisdictions – Worcester, Baltimore, & Howard County	Quality Assurance Committee	Safety Permanence Well Being QA		Completed
		3.3.4 Implemented local assessment in 6 additional LDSS by March 2007.	Quality Assurance Committee	Safety Permanence Well Being QA	Implemented Local Assessments for: Wicomico County (August 2006), Baltimore City (September 2006), Cecil (November 2006), Prince George's (January 2007), Washington (February 2007) and Montgomery (March 2007) Counties	Completed
3.4	Streamline case transfer process (case flow) in Baltimore City DSS.	3.4.1: Convened workgroup to look at recommendations from Casey study regarding case flow issues.	Baltimore City DSS	Safety Permanence Well Being		Completed
		3.4.2: Developed and implemented a streamlined process to transfer a case from one unit to another.	Baltimore City DSS	Safety Permanence Well Being		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
3.5	Develop and implement methods for measuring the timely identification and diligent efforts in locating and assessing non-custodial parents and relatives.	3.5.1: Conducted special study in three jurisdictions (one being BCDSS) by pulling random sample of foster care cases to review for timely identification and assessment of non-custodial parents and relatives.	QA Unit	Safety Permanence Well Being QA		
		3.5.2: Based on QA review and special study, required LDSS Performance Improvement Plans.	QA Unit	Safety Permanence Well Being QA		

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
4.1	Ensure appropriate screening of CPS reports of non-English speaking persons by complying with the State’s Limited English Proficiency (LEP) policy.	4.1.1: All available LDSS staff received training on “Provision of Service to Clients with Limited English Proficiency” within the past 24 months.	OEPE	Safety Permanence Well Being Training		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.1.2: Memo regarding translation resources sent to local departments	OEPE	Safety Permanence Well Being		Completed
		4.1.3 Statewide translation service contract in place and made accessible to local staff	OEPE	Safety Permanence Well Being		Completed
		4.1.4 Overview of LEP services and policy incorporated into LDSS new worker orientation	OEPE	Safety Permanence Well Being Training		Completed
		4.1.5 Track the use of LEP services	OEPE	Safety Permanence Well Being		On-going
4.2	Develop and implement a statewide recruitment plan to target specific populations (i.e. children with intensive needs, emergency placements, sibling groups, older	4.2.1 Identified Statewide resource development staff	Resource Development Unit	Safety Permanence Well Being		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
	youth, and respite resources)	4.2.2: Identified local recruiters and trainers assigned to LDSS	Resource Development Unit	Safety Permanence Well Being	Recruiters have been identified in all 24 local departments.	Completed
		4.2.3: Used data to identify target populations and geography	Resource Development Unit	Safety Permanence Well Being	.	Completed
		4.2.4: Consulted with AdoptUSKids and with other state agencies to revise statewide recruitment plan	Resource Development Unit	Safety Permanence Well Being	Practice in place to work continuously with AdoptUSKids.	Completed
		4.2.5: Began implementing statewide recruitment plan	Resource Development Unit	Safety Permanence Well Being	Plan distributed to all LDSS. Work with newly formed foster parent association and public relation firm began.	On-going

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.2.6 Developed a media campaign that informed the community about out-of-home placements and ways that the community could assist in supporting children who are in out-of-home-placements	Resource Development Unit Communications Office	Safety Permanence Well Being	Developed a plan to produced a Public Service Announcements; Partner with state cable television to air announcements; developed 800 number to capture calls for public; developed outreach; Radio, Print & Transit advertisement	On-going
		4.2.7: Disseminated campaign material to LDSS.	Resource Development Unit Communications Office	Safety Permanence Well Being	Produced a Public Service Announcements; Partner with state cable television to air announcements; developed 800 number to capture calls for public; developed outreach; Radio, Print & Transit advertisement	On-going
		4.2.8: Modified PRIDE to include information on sibling placement and visitation; IL services; and on managing/modifying challenging behaviors.	Resource Development Unit	Safety Permanence Well Being		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.2.9 Continued statewide in service training program for foster parents and formal kinship caregivers (developed) that address the skills and needs of foster parents and kinship caregivers to care for our children. To be included as part of the Child Welfare Academy.	Resource Development Unit Child Welfare Academy	Safety Permanence Well Being Training		On-going
		4.2.10: Ensure LDSS know that children can be placed on the Maryland Adoption Exchange prior to being legally freed for adoption	Social Services Administration	Permanence Well Being		On-going
		4.2.11: Identified children who have goal of adoption and who do not have an identified adoptive resource.	Stephanie	Permanence Well Being		Completed
		4.2.12: Developed targeted recruitment plan with LDSS for children identified as needing an adoptive resource.	Stephanie	Permanence Well Being		On-going

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.2.13: Develop a report for LDSS managers of children with a permanency plan of adoption	Adoption Unit	Permanence Well Being		Completed
		4.2.14: Established targeted finalized adoption goals for LDSS	Social Services Administration – Lead Adoption Unit	Permanence Well Being	Children with a plan identified Goals were determined and disseminated to locals based on an established formula.	Completed—goals established around October every year
		4.2.15 Identify children with a permanency plan of adoption without an adoptive resource				On-going
		4.2.16: Refined DHR contract process for contracting with providers who will serve high-end youth and large sibling groups.	Resource Development Unit	Permanence Well Being		
		4.2.17: Develop and Implement methods for early identification of children needing excess cost placements to assure appropriate care	Resource Development Unit	Permanence Well Being		

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
4.3	Increase support services to foster parents and formal kinship caregivers.	4.3.1: Developed a foster parent/kinship/adoptive care recruitment and retention plan.	Resource Development Unit	Safety Permanence Well Being		Complete
		4.3.2: Created a foster parent survey with the Maryland Foster Parent Association to be distributed	Resource Development Unit	Permanence Well Being		Completed
		4.3.3: Continue statewide service training program for foster parents and formal kinship caregivers	Resource Development Unit	Permanence Well Being		On-going
4.4	Develop guidelines for respite care services.	4.4.1: Convened workgroup to develop guidelines	Social Services Administration – Lead Out-of-Home-Unit	Permanence Well Being		Completed
		4.4.2: Disseminated guidelines to LDSS and the Maryland Foster Parent Association	Out-of-Home-Unit	Permanence Well Being		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.4.3: Monitor use of respite care	Out-of-Home-Unit	Permanence Well Being		On-going
4.5	Strengthen SSA/LDSS collaboration with Maryland State Department of Education (MSDE) and local school districts	4.5.1 Presented Educational Access issues to IV B-Children's And Family Services Advisory Committee	PIP Access Committee	Well Being		Completed
		4.5.2: Held summit on Educational Access issues and solutions including LDSS, local education, MSDE, advocates, foster parents	PIP Access Committee	Well Being		Completed
		4.5.3: Established agreement for 1-3 additional meetings to develop short and long range strategies to address educational access issues	PIP Access Committee	Well Being		Completed
		4.5.3: Develop and distribute Child Welfare and Education Policy and Practice Handbook	PIP Access Committee	Well Being		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.5.4: Hold joint conference for Child welfare and Education Staff to provide information and training on policies and practices	PIP Access Committee	Well Being		
		4.5.5: Conduct annual training on in-home and out-of-home policies for education staff	SSA	Safety Permanence Well Being		On-going
		4.5.6: Collaborated with MSDE regarding infant and toddler programs for children under age 3 involved in an indicated CPS case	In-Home Unit	Safety Permanence Well Being		
4.6	Strengthen collaboration with Department of Health and Mental Hygiene (DHMH) around access to mental health and substance abuse services.	4.6.1 Presented Mental Health and Substance Abuse Services Access issues to IV B-Children's And Family Services Advisory Committee	PIP Access Committee	Well Being		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.6.2: Held summit on Mental Health Access issues and solutions including LDSS, local education, MSDE, advocates, foster parents	PIP Access Committee	Well Being		Completed
		4.6.3: Collaborated with sister agencies and LDSS on Substance Abuse issues and services	PIP Access Committee	Well Being	Meetings, Presentations, Conferences Regarding the Integration of Child Welfare and Substance Abuse Treatment Services 2005, 2006, 2007	Completed
		4.6.4: Established agreement for 1-3 additional meetings on Mental Health Access and Substance Abuse Service Access to develop short and long range strategies to address mental health /substance abuse access issues	PIP Access Committee	Well Being		Completed
		4.6.5: Implement developed strategies	Resource Development Unit			

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.6.6: Held regularly schedule meetings with Mental Health stakeholders to address barriers	Resource Development Unit			
		4.6.7: Partnering with DHMH in the achievement of the goals of the Mental Health Transformation Grant	Resource Unit	Well Being		
4.7	Identify service gaps at the Local Department level (not available, quantity and quality) and develop a resource development plan.	4.7.1: Collaborated with NRC for Family-Centered Practice and Permanency Planning to conduct a Service Array assessment in three pilot jurisdictions.	PIP Access Committee	Well Being		Completed
		4.7.2: Identified and trained available staff to conduct service array assessment.	PIP Access Committee	Well Being		Completed
		4.7.3: Completed pilot jurisdiction ((Worcester Co DSS) service array assessments and finalized results in written report.	PIP Access Committee	Well Being		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.7.4: Created and began implementation of resource development plans in pilots	PIP Access Committee & Resource Development Unit	Well Being	Wicomico County's Resource Development Plan for Child and Family Services (December 4, 2006) Worcester County's Resource Development Plan for Child and Family Services (Final Draft – Pending WCDSS Senior Leadership Review) Somerset County's Resource Development Plan for Child and Family Services (December 4, 2006)	Completed
		4.7.5: Develop phases to complete process in the remaining jurisdictions	Resource Development Unit	Well Being		
		4.7.6: Continue the creation and implementation of resource development plans	Resource Development Unit	Well Being		On-going
		4.7.7: Create statewide resource development plan	Resource Development Unit	Well Being		

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.7.8: Engage community in the development of needed resources	Resource Development Unit	Well Being		
4.8	Identify and distribute existing directories of referral programs, which list and provide directory of services.	4.8.1 Ensured posting of all treatment foster care and group home provider resources in the DHR intranet	Office of Licensing and Monitoring	Permanence Well Being		Completed
		4.8.2.Provided link to Gov Office for Children Website to ensure access to all provider profiles where DHR foster children are placed	Office of Licensing and Monitoring	Permanence Well Being		Completed
4.9	Eliminate barriers to cross-jurisdictional placements	4.9.1: Sent follow-up memo to LDSS regarding inter-jurisdictional placement issues discussed at LDSS site visits.	Social Services Administration	Permanence		Completed
		4.9.2: Trained available LDSS adoption staff on preparing summaries for photo-listing of waiting children (AdoptUSKids)	Social Services Administration – Lead Adoption Unit	Permanence Training		On-going

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.9.3: Trained available LDSS staff on the use of the AdoptUSKids website and on how to respond to interested families (intake). (AdoptUSKids) following training in 9 months.	Social Services Administration – Lead Adoption Unit	Permanence Training		On-going
		4.9.4: LDSS have the ability to manage their cases, respond to families, and match their children using the AdoptUS Kids website. SSA adoption staff will monitor in partnership with AdoptUSKids children placed on the exchange	Social Services Administration – Lead Adoption Unit	Permanence		Completed
		4.9.5: SSA staff continues to register and update children on MARE	Social Services Administration – Lead Adoption Unit	Permanence		On-going
4.10	Participate in the development and implementation of the Maryland Wrap Around initiative (this initiative includes all child-serving State agencies and the Governor’s Office for Children is the lead agency).	4.10: Implement wrap around services in two pilot sites (BCDSS and Montgomery County) assess and recommend to expand effort or not	Social Services Administration	Safety Permanence Well Being		
4.11	Implement provider performance accountability	4.11.1: Developed performance standards for private providers.	Office of Licensing and Monitoring	Permanence Well Being		

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	NEXT STEPS
		4.11.2: Revised contracts to incorporate standards and requirements for corrective action (sanctions) when standards are not met	Social Service Administration & Office of Licensing and Monitoring	Permanence Well Being		Completed
		4.11.3: Trained providers on revised standards and expectation of the Department	Social Service Administration & Office of Licensing and Monitoring	Permanence Well Being		
		4.11.4: Held standard meetings with the provider community and other state agencies to address issues related to placement stability, placement resource expansion for children with challenging needs, and other placement issues.	Social Service Administration & Office of Licensing and Monitoring	Permanence Well Being		
		4.11.5: Monitor contracts for compliance	& Office of Licensing and Monitoring	Permanence Well Being		On-going
4.12	Continue to work with the District of Columbia to ensure that ICPC laws and regulations are being followed.	4.12.1: SSA will continue regular meetings with CFSA- DC to resolve barriers.	Adoption Unit	Safety Permanence Well Being		

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Work Plan Detail Goal 5 – Design evidenced-based practice strategies to enhance services and child outcomes.						
ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
5.1	Provide LDSS training and access to FACTS, CIS and CARES	5.1.1: Make security forms and process available on-line	Research Unit	Safety Permanence Well Being		Completed
		5.1.2: Met with IT department to discuss LDSS needs	CIS Workgroup	Safety Permanence Well Being		Completed
		5.1.3: Created and begin implementation of plan to provide LDSS training and access to all information systems	CIS Workgroup	Safety Permanence Well Being		Completed
		5.1.4: Identified available LDSS staff who can assist with timely data entry functions and provided training as needed.	CIS Workgroup	Safety Permanence Well Being		On-going
5.2	Continue efforts for Early Release (ER) of MD CHESSIE. Early Release relates only to the Intake/Screening process	5.2.1: Began ER in three sites (Charles, Wicomico, and Queen Anne's)	MD CHESSIE Workgroup	Safety Permanence Well Being		Completed

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WORK PLAN

Work Plan Detail Goal 5 – Design evidenced-based practice strategies to enhance services and child outcomes.						
ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
		5.2.2: Completed Implementation in 11 LDSS including BCDSS of Early Release component	MD CHESSIE Workgroup	Safety Permanence Well Being		Completed
		5.2.3: Completed post-implementation and maintenance of Early Release component	MD CHESSIE Workgroup	Safety Permanence Well Being	System is available and being used by 24 Local Departments including Baltimore City and Prince George’s County, the 2 largest jurisdictions regarding cases.	Completed
5.3	Continue efforts for full operation of MD CHESSIE. MD CHESSIE will meet requirement of Statewide Information System	5.3.1 Completed training of available pilot staff.	MD CHESSIE Workgroup	Safety Permanence Well Being Training		Completed
		5.3.2 Conducted Pilot	MD CHESSIE Workgroup	Safety Permanence Well Being		Completed
		5.3.3 Completed statewide implementation	MD CHESSIE Workgroup	Safety Permanence Well Being		Completed

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ITEM NO.	ACTION STEPS	MEASURABLE BENCHMARKS	RESPONSIBLE PERSON	IV B OUTCOME	ACCOMPLISHMENTS	Next Steps
5.4	Enhance current tickler system that reports to LDSS and SSA children's length of stay and any outstanding court actions.	5.4.1 Develop a Permanency Hearing Performance Details report for each LDSS.	Research Unit	Safety Permanence Well Being		Completed
		5.4.2: Create CHESSIE management report for LDSS to inform of length of stay of children in out-of-home care	Research Unit	Safety Permanence Well Being		Completed
		5.4.21 Create CHESSIE management report for LDSS to inform of court reports				Completed
5.5	Decrease response time when LDSS request data reports from SSA.	5.5.1: Developed written procedures on how to request data reports and how to respond to such request	Research Unit	Safety Permanence Well Being		
		5.5.2: Created and disseminated a survey to LDSS to identify data reports that are helpful, not helpful or reports that are needed.	Research Unit	Safety Permanence Well Being		
		5.5.3: Sent written procedures to LDSS and SSA program managers. Create request tracking log	Research Unit	Safety Permanence Well Being		

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WORK PLAN

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		5.5.4: Response time reports submitted to Director of Special Services for monitoring.	Research Unit	Safety Permanence Well Being		