The mission of MCWAP is to assure that the state system is meeting the safety, permanency, and well-being of children and families through assessment, research, case reviews, advocacy and greater citizen involvement. Our goal is to promote child safety and quality services for children, youth and families.

Maine Child Welfare Advisory Panel

March 5th, 2021 / 9 a.m.- 11 a.m.

Virtual: Meeting held over Zoom

Co-Chair: Bobbi Johnson Co-Chair: Deb Dunlap Panel Coordinator: Kathryn Brice

Agenda

9:00 a.m.- Welcome and Introductions

<u>Virtual attendance</u>: Christine Alberi, Esther Anne, Chris Bicknell, Betsy Boardman, Kathryn Brice, Jamie Brooks, Travis Bryant, Adrienne Carmack, Lyn Carter, Kelly Dell'Aquila, Deb Dunlap, Lanelle Freeman, Jim Jacobs, Bobbi Johnson, Ashley McAllister, Annette Macaluso, Andrea Mancuso, Libby McCullum, Deb McSweeney, Brittany Raven, Cindy Seekins, Kelly West, Erin Whitham

<u>Approval of January and February Minutes</u>: Unanimous vote to approve January and February minutes.

9:10 a.m.- Standing Agenda Items

<u>OCFS Updates:</u> The Panel heard from Bobbi Johnson, Associate Director of OCFS. Bobbi reported that OCFS is continuing to look at the number of children in care and each OCFS district is developing a permanency review process. As of this morning, there are 2194 children in state custody- the lowest it has been since October 2019.

The Department is also continuing to work on the goals identified in its Program Improvement Plan (PIP), where more than half of the key activities are completed, and the remainder are on or ahead of schedule (with the exception of 3 that are behind). OCFS is working on quality assurance for the Structured Decision Making (SDM) tool, and continues to work with Muskie on several items: revisions to the Family Team Meeting (FTM) policy, implementation of a Learning Management System (LMS), developing a Field Instruction Program, etc. There is also work being done with the Maine Judicial Branch to consider how to more effectively involve parents in the court system.

A formal policy around immunizations- and the Department's clear stance in support of them- is also in the works. The policy will outline a list of activities to complete when parents have questions about vaccines or are not in support of their children receiving them, as well as clear guidance regarding resource parents consenting to routine medical appointments. Dr. Carmack highlighted that the lack of clarity around who can consent to medical care has been described as a barrier to youth in care, nationally; the hope is that this policy will help to reduce this barrier in Maine. Once finalized, the Department will be sharing this information with the medical community to move these efforts forward.

Members wondered how parents will fit into the decision-making process regarding healthcare and immunizations. OCFS responded that information will be gathered from parents regarding their concerns, and conversations will be facilitated to highlight the risks/benefits of the appointment or immunization. From there, the next steps will depend on where the case stands in the reunification/legal process. OCFS reiterated that they are committed to involving parents whenever possible. For example, given that only 1 person is allowed into medical appointments with children right now due to COVID, parents whose children are in custody have been encouraged to participate by phone or video.

Panel members noted that in their experience, it isn't always the case that parents are against immunizations. More often, children are not up to date on vaccines as part of a larger issue of lacking general medical, dental and vision care. OCFS commented that they have also been part of conversations around a statewide initiative to improve children's oral health and access to dental care.

9:20 a.m.- New Business

<u>Children's Bureau</u>: As part of the PIP discussed earlier, the Office's federal partners at the Children's Bureau are hoping to convene a focus group with MCWAP members to discuss their experiences with OCFS. The Panel agreed to have the partners join the next monthly meeting.

<u>Ombudsman Report</u>: The Panel heard from Christine Alberi, Executive Director, Ombudsman, regarding the recently released 2020 Ombudsman Report.

Christine reported that the Maine Child Welfare Services Ombudsman office was created by statute in 2001 following the death of Logan Marr. The role of the office is to investigate complaints against Child Protective Services, through a neutral, child-focused lens. The Ombudsman's Office receives between 600-700 calls per year, most often from parents and family members but also from a variety of other sources (GALs, case managers, landlords, the Governor's office, etc.). The office completes between 80 and 120 case reviews per year, all of which are paper reviews; the Ombudsman does not attend case meetings or interviews.

When the initial complaint is received, the concerned party will be scheduled for an hour-long phone call to discuss the concerns in greater depth. During this call, the Ombudsman will learn more about the case and may explain policies, practice, laws, etc. to help the caller better understand the child welfare process. The Ombudsman may refer callers to another agency or suggest strategies that may alleviate their concerns. A set of criteria is also considered during the phone call to determine whether the case should be opened for a formal review. If it is selected for review, the Ombudsman will type of a summary of the caller's concerns and forward the information to the relevant district office. The district office-usually the PA and supervisor- will submit a response to the concerns, and the Ombudsman will request relevant records, including MACWIS documentation, court orders, medical records, etc. Once the information is received, the Ombudsman will review the records and write a report. This report also gets forwarded to the district office to respond to, and then a finalized report is generated.

In addition to the above, the Ombudsman's office also produces an annual report based on that year's case reviews. These reports consider trends in findings regarding what is working well and what may not be. Over years, the office has found that the trends observed are usually statewide issues.

Christine stated that this year's report centered around patterns/issues similar to those identified in previous years. The major trends identified highlighted that the Department struggles with practice issues and decision-making specifically around 2 critical points of a case: in deciding whether a child is

safe in the investigation, and in considering whether a child would be safe at home once reunified with parents. More specifically, the report highlighted the following areas of concerns: not recognizing or considering risk when evidence of risk is clear, not completing the tasks required in a basic investigation, not monitoring safety plans that have been created with families and not regularly meeting with individuals involved in the safety plan, including parents and children in the safety plan. The Ombudsman has also observed inconsistencies in meaningful contacts with parents, thoroughly assessing a parent's significant others and communicating with service providers, especially in providing objective recounts of the Department's concerns. The report also determined inconsistencies in the Department's practice of completing pill counts, providing random drug screens, providing visit and transition plans, and setting up trial home placements with supports.

Christine recognized that the Department is in the process of updating policies and shared the concern that updates to policies will not in and of itself ensure that the practice is being consistently implemented throughout the state. Additionally, caseworkers must be adequately trained in understanding the policies so that they can implement practice consistently.

Christine acknowledged the challenging nature of casework, especially during a pandemic. Members asked if there's any information on the impact of COVID on casework, to which Christine responded that it's likely too early to tell. Members also asked if the Ombudsman's office ever receives calls of praise, and if not, thought it might be interesting to invest in a place to receive positive feedback. Christine reported that while praise is typically not the primary reason for a call to the Ombudsman, she'll often hear positive remarks during the call. For example, a caller might say, "our first caseworker was wonderful, but since then...". Christine stated that her office is aware that it can be difficult for workers to receive a potentially critical report regarding their work with a family. With this in mind, the Ombudsman's office always makes sure to highlight positives in their report as well. Lastly, members inquired about at what point in a case can someone reach out to the Ombudsman's office. Christine reported they can take calls at any point from concerned callers, even during or after a TPR.

The Panel and Christine discussed the complexities involved in weighing risk when deciding whether a child is in harm, even when utilizing the SDM tool as an aid, and acknowledged the difficulty of the field in general, both intellectually and emotionally. The Panel and Christine also discussed caseload as it relates to a worker's ability to complete thorough and accurate work. The Panel remarked that OCFS has a way of "weighting" cases and wondered what the current caseload/workforce numbers were like. Kathryn agreed to bring this to the OCFS team.

A discussion was had around how to ensure that families are aware of the Children's Ombudsman. Christine reported that the Department tends to do a good job of spreading the word, especially as caseworkers are required to hand families a pamphlet from the Ombudsman's office at the start of an investigation. Christine reported that while it isn't necessary for callers to prepare ahead of the phone call, it is helpful for them to have a clear timeline of the events of a case. The Panel discussed the call volume at the Ombudsman office, and while Christine reported that they are stretched thin in terms of responding to calls, they would never discourage anyone from calling.

The Panel thanked Christine for joining today's meeting.

<u>Systems-Approach to Child Welfare</u>: Deb D. explained that this notion was touched on by Todd Landry at the last Panel meeting, though may not have ever been explicitly stated in meetings before. While MCWAP is not responsible for overseeing the broader child welfare community, this group is charged

with looking at the places where agencies fit together to promote child welfare (including courts, providers, etc.).

A few members offered to provide information to the Panel at a future meeting about the role of the AAGs office. The Panel discussed the expansiveness of the child welfare system, highlighting that it can only focus on certain systems as there are so many facets to this field. Another member underscored the relative newness of the system as well.

<u>Mission Statement</u>: The Panel resumed last month's conversation regarding the phrase "case reviews" that currently exists in MCWAP's mission statement. The Executive Committee reminded Panel members that this mission statement was developed through a merger of past mission statements and the Citizen Review Panel statute. While CRPs are tasked with providing case reviews, that is not something that MCWAP has historically done. Instead, Maine's Child Death and Serious Injury Review Panel (CDSIRP) completes said reviews.

The group discussed the nuances of the terms 'case review' and 'mission statement', as well as the scope of work that MCWAP has done in previous decades. Members wondered how the by-laws would be impacted by removing the phrase from the mission statement and discussed whether doing so would limit the scope of what this group can accomplish. Another member suggested that since MCWAP is not set up for completing confidential case reviews, the Panel could always recommend that the CDSIRP consider a recognized trend. Lastly, members suggested that MCWAP could obtain the other CRPs reports for information on the work of these other panels as well.

A motion was made and seconded to remove the term 'case review' from MCWAP's mission statement. The Executive Committee will hold a vote by email in the coming weeks.

<u>Legislation</u>: The Executive Committee recently had a conversation acknowledging that folks on this Panel have connection to certain legislative activities. As such, the Committee wanted to express that it would be appropriate for a Panel member to mention a particular legislation or session in either a meeting or an email thread, if they thought that other members might also be interested in hearing about it. With that, however, members should expect that the Department will not be providing any formal response.

<u>Workgroup Meetings</u>: The Executive Committee reminded members that the groups can call in the Coordinator to their breakout rooms at any time, if questions arise.

With that, the Subcommittees broke out into separate Zoom rooms to work on their topics. Once the breakout groups rejoined the main group, they were asked to provide updates to the Panel:

1. Family-centered policy and practice

Kelly, Betsy, Lyn, Lanelle, Brittany, Esther, Jamie, Annette, Andrea, Christine

The subcommittee expressed that they have done a deep dive into current issues in training gaps as they relate to DV and co-parenting/parallel parenting planning. As a result, the group has a proposal for MCWAP that involves a series of mini trainings that focus on DV dynamics, as well as the intersection between PC and FM cases. The subcommittee has prepared a document which outlines its recommendations and is ready to move forward to begin offering these no-cost trainings to a wide audience, including judges, attorneys, GALs, caseworkers, etc.

It was decided that Kathryn would email the subcommittee's recommendations to the Panel at large. Feedback will be received until the 10th of March, and then the recommendations will be put out for an official vote due by 03/16. This way, when the subcommittee meets on 03/17, they will be able to determine next steps for their group.

2. Effective communication/coordination for the care of children entering the system Alana, Cindy, Jim, Ahmen, Deb McSweeney, Marie, Ashley McAllister

The group reported that they are continuing to work on an electronic health passport which would have different components for each of its users, including biological parents and caregivers, medical professionals, etc. The workgroup is considering who should have access to each part of the passport and considered that medical information may be hard for non-medical individuals to understand.

3. Father Engagement

Erin, Travis, Jean, Chris, Libby, Jamie, Kelly W.,

The subcommittee had its first meeting to talk about the listening sessions for fathers involved in child welfare which will be held by MCWAP in partnership with OCFS. The subcommittee reported that it would be useful to hear from fathers who were actively involved in their cases, as well as fathers who did not have the opportunity to or chose not to engage with the Department.

The group developed a list of resources that would be needed to hold the sessions and reported that they hope to meet with a representative from OCFS (Bobbi or Tammy) at the next meeting to discuss logistics. The group also stated that it would be helpful to engage fathers who may be interested in participating in the workgroup.

11:00 a.m.- Adjourn and Next Steps

OCFS to provide Panel information on caseload and workforce

Next Panel Meeting: Virtual Meeting, April 2nd, 2021, 9 a.m.- 11 a.m.