

MAINE CHILD WELFARE

Priority Reform Recommendations



INTRODUCTION

Maine is approaching the anniversary of the deaths of two young children who were involved with our child welfare system. These tragic events, as well as the difficulty of finding suitable placements for children and youth, are illustrative of many problems with the system and have brought the issue of child welfare to the forefront, ignited public interest and motivated legislative action. There is a clear and urgent need to reform the current system. The changes that have been initiated so far are only a beginning. We have much more to do to address the many system failures that compromise the lives of children and happen all too often.

Our State child welfare services touch the lives of many vulnerable children during critical periods of physical, emotional, and cognitive development. There were **7,288** reports involving **10,119** children assigned to a caseworker for a child protective assessment during 2017 [2]. These children risk harm and disruption. They cannot continue to wait for adults and state systems to get things right.

Our state currently has a mandate and an opportunity to engage in effective reform of our child welfare system. We believe that the system responsible for protecting and promoting the welfare of children includes all of us, in partnership with our state's executive leaders, and that true reform will be achieved only through our concerted, coordinated efforts.

Based on our experiences and knowledge of available research and promising practices, we offer the following **five priority reform recommendations** for making both immediate and long-term improvements to the systems designed to protect children and strengthen families:

- Establish Measurable Outcomes for Child Safety and Well-Being
- Invest in Supportive Services
- Address Child Welfare Workforce Issues
- Improve Cross-System Collaboration and Public Reporting
- Prioritize Permanency and Prevention Services



PRIORITY 1: ESTABLISH MEASURABLE OUTCOMES FOR CHILD SAFETY AND WELL-BEING

Overview: To operate and maintain an effective child welfare system, we must move beyond measuring success or failure by extremes. If we only measure safety and permanency, we fail to recognize the ‘whole’ child and their needs for positive development and well-being. We must have a clear vision of what constitutes the well-being of our children and families [3]. This extends well beyond and before child protection; we must consider the factors that contribute to child neglect and maltreatment, and work to intervene with families who are at risk before child protection is involved. To accomplish this, Maine must develop and implement a universal framework of child safety and well-being, including indicators that can be periodically measured, assessed, and used to develop a strategic response [4]. These indicators should both align with, and expand upon, the federal requirements under the Child and Family Services Review (CFSR) process [5].

Action 1-A: Implement a statewide framework and indicators for child and family well-being.

Safety, permanency, and well-being are the core elements of a statewide child and family framework. Capturing progress on these indicators is critical. Under reporting has given us a less nuanced understanding of children’s health and well-being, resulting in our failure to address the long-term impacts of trauma in the lives of children. Federal law has been explicit that well-being is a goal for all child welfare services since the enactment of the Adoption and Safe Families Act in 1997. More recently, in 2012, the federal Administration for Children, Youth and Families elevated the importance by devising an actionable approach that identifies four basic domains of well-being: cognitive functioning, physical health; behavioral/emotional functioning; and social functioning [6].

While Maine is accountable to federal mandates of well-being through the Administration of Children, Youth and Families’ ongoing Child and Family Services Review (CFSR) process, the federal criteria is limited and insufficient to ensure a global perspective [7]. Our enhanced system must track the well-being of children who come to the attention of child protective services – both before and after interventions, across age groups, and use age-appropriate measures that are comparable over time. In addition to objective measures, data should include input from caseworkers, parents, youth, caregivers, and others.

Action 1-B: Establish protocol for DHHS to collect data and report on these measures to the public and legislature annually. Use outcomes to set policy and budget priorities.

Transparency and data integrity are critical to routinely evaluating practices and policies and their effectiveness [8]. The Maine Department of Health and Human Services (DHHS), Office of Child and Family Services (OCFS) collects data on the children and families involved with the service system. We recommend that DHHS assess the data currently collected, improve collection at all points in the system, including well-being indicators, and make findings readily available to the public and to organizations and professionals who engage with the child welfare system. Public reports should be made to broad audiences, more frequently than what is provided during federal review, and should include data about the status of children in more than aggregate indicators. DHHS should provide frequent - at a minimum, semi-annually - reporting of data on measurable outcomes of child safety and well-being (as recommended above), to the public, the Ombudsman for Child Welfare, the Maine Child Welfare Advisory Panel, the Governor's Children's Cabinet and to the Legislature, for evaluation purposes, and to make needed corrections or adjustments to the budget, practices, and policies.

PRIORITY 2: INVEST IN SUPPORTIVE SERVICES

Overview: Building only downstream services to respond to child maltreatment, without addressing the underlying issues, perpetuates a cycle of reactive and ineffective reforms. The impact of family stressors, such as lack of access to affordable healthcare and treatment for mental health and substance use disorders, lack of access to quality childcare, and economic, housing and food insecurity have a direct correlation to child maltreatment rates. We must move beyond simply responding to symptoms by addressing the underlying factors that contribute to child maltreatment.

The top reasons children come into protective custody in Maine are consistent with national trends: parent mental health, untreated substance use disorders, domestic violence, and repeat generational trauma [9]. Effective reforms to our child welfare system must include honest examination and improvement of the supportive systems for families that address these root causes of child abuse and neglect.

Action 2-A: Utilize state and federal funds (including Families First Prevention Services Act and Temporary Assistance for Needy Families) to improve basic safety-net resources and expand the availability of preventive, supportive, and treatment services for families.

Currently, the State receives approximately \$78 million in annual federal TANF funds and has an accumulated balance of about \$148 million available [10]. We urge incoming administrators to invest these funds to improve basic safety-net needs for families, including food and housing, in order to prevent families from reaching crisis levels of physical and emotional stress. Further, as DHHS continues to explore ways in which available funds can be used to support programs that meet TANF purposes beyond providing basic assistance, we urge policymakers to strategically fund allowable services that directly correlate to child safety and well-being. These include mental health and substance use disorder services for parents, domestic violence services, high-quality childcare, and adult work education and training [11].

In addition to TANF funds, 2018 changes to federal guidelines have made increased resources available to Maine through the Families First Prevention Services Act [12]. These changes have expanded use of Title IV-E to allow funding services that prevent the placement of children and youth in state care, including in-home parent skill-based programs, and mental health and substance use prevention and treatment services. We urge the State to opt in to Families First, and to make full and strategic use of these and all available federal funds [13] to improve the lives of children and families in our state. In order to safeguard the availability of these services for families when and where the need is greatest, it is essential that the State ensures reimbursement rates for all supportive services are adequate.

Finally, we believe it is not enough to continue pursuing the same limited sources of funds to fully support the well-being of families. We encourage the State to seek and respond to the interest of non-governmental community partners who want to invest in the safety and well-being of children, youth and families. Businesses, faith communities, and philanthropic organizations and individuals also care deeply about Maine's children and youth, and should be invited to the problem-solving table. Examples of innovative ways community partners are investing in supports for families already exist [14] here in our state, and national philanthropic partners are also actively investing in child welfare services [15]. Expanding opportunities for this type of participation will benefit families, and broaden shared responsibility and commitment beyond our state government.

Action 2-B: Maintain MaineCare coverage for parents after child removal, through the duration of the reunification process.

The issues parents face that bring their children into protective custody require a highly skilled and coordinated professional response, including medical, behavioral and mental health, and substance use disorder treatments. The majority of families involved with child welfare live below the poverty line, and require state assistance to receive such care. Under our current system, parents who are covered by MaineCare automatically become ineligible when their children are removed from their custody. Payment of their treatment must be coordinated by already overburdened child welfare caseworkers, and often results in disrupted services for parents. This practice shifts responsibility for making medical decisions away from medical providers and onto social workers, and we have collectively experienced situations where parents were no longer able to receive treatments ordered by medical professionals because the payment was not approved by their child welfare worker. Current practice also results in parent treatment services being paid entirely through state general funds. When parent services are paid using MaineCare, the state only pays a third of the costs due to federal match.

Our State has long been aware of the need to change this policy, and a bipartisan bill was passed to address the need in 2013 [16]. We are uncertain why this has not resulted in changed practice. We urge our incoming policymakers to make this critical, common-sense improvement to our child welfare system without delay.

PRIORITY 3: ADDRESS CHILD WELFARE WORKFORCE ISSUES

Overview: An effective child welfare and child protective system depends upon the front-line workers who assess child safety and recommend actions that greatly impact the safety and well-being of the children and families they serve [17]. Under the current system, caseworkers have carried too great of a burden of responsibility– with unmanageable caseloads, forced overtime, unsafe home visiting practices, and inadequate pay, training, and support. These conditions have resulted in turnover rates as high as 60% within OCFS [18]. High caseworker turnover rates have a direct impact on vulnerable children [19]. We must do more to ensure that our state’s child protective caseworkers – and their supervisors - are equipped and supported to do their jobs effectively, and to shape the policies and programs they implement each day [20].

Action 3-A: Improve the role of schools of social work in training and support. Re-establish the Child Welfare field instruction units.

To attract and retain the highest quality child welfare workforce, we must invest in evidence-based, trauma-informed education and training for those pursuing a degree in social work in our state. We urge DHHS to renew working relationships with the schools of social work at Maine's universities and colleges, and to re-establish the child welfare field instruction units [21].

The child welfare field instruction units were a collaboration between the universities and DHHS that provided students of social work with in-depth academic instruction and field experience in child welfare. Students were supported and supervised by professors, caseworker supervisors, and field instructors. Seniors were given the opportunity to participate in a paid internship at the Department, and in exchange agreed to apply for a position if available within the Department upon graduation. This kind of hands-on, dynamic academic and field training is a critical investment that yields returns in our future child welfare caseworkers.

In coursework and hiring processes, it is also vital that the entire child welfare workforce receive training in Adverse Childhood Experiences, toxic stress, and resilience, to provide an understanding of the roles they play in family dynamics for children at risk or in the process of removal [22]. This is an important investment in our future workforce, giving students a foundational understanding of child and family well-being and risk that they will take with them into their professional work.

Action 3-B: Codify a formula for caseload limits to lower caseload burdens for front-line child welfare case workers. Increase the number of workers as needed to ensure caseload limits are met.

Child welfare caseworkers in Maine are required to serve too many children and families. This negatively impacts both caseworkers in the Department, and the children and families they are meant to serve. Immediate action must be taken to ease workload, stem caseworker burnout, allocate staff appropriately across counties, and ensure cases are being handled with the appropriate level of care and attention. The Child Welfare League of America [23] and the Maine State Employees Association have developed recommendations for child welfare caseload standards. We urge this administration to study these standards, to develop and codify a formula for child welfare caseload limits, and to request the resources needed to achieve desired caseload standards.

The commitment to ensure Maine’s most vulnerable children are being adequately served will only be able to be fully implemented with a commitment to change that is reflected in our laws. Our current statute links appropriate levels of state action in situations of child abuse and neglect to the availability of funds: “The department may take appropriate action, **consistent with available funding**, that will help prevent child abuse and neglect and achieve the goals of section 4003 and subchapter XI-A.” [24]

This element of our statute has allowed budgeting decisions that have left our current system without the necessary resources to keep children safe. We believe all children are entitled to protection from harm, and providing this protection requires adequately resourcing our child welfare system. We urge our executive and legislative leaders to revise this statute to ensure that our commitment to protecting children from abuse and neglect not be impacted by shifting budget priorities.

PRIORITY 4: IMPROVE CROSS-SYSTEM COLLABORATION AND PUBLIC REPORTING

Overview: Collaborative, critical decision-making in child welfare is essential to keeping children and youth safe from harm. In the 2018 OPEGA investigation following the deaths of two children in state care, the authors noted “the risk of child abuse/neglect, particularly risk of physical abuse, was not necessarily evident without continually putting together many pieces of information held by various parties interacting with the child and/or her parents over time.” They also noted “several junctures...where greater information sharing among several parties might have prompted further action or reassessment of the risk level for the family.” [25]

We must improve collaboration between child welfare services and community parties who regularly interact with parents, children and youth. Developing sustained, meaningful collaboration across sectors will require a shared commitment at all levels, including modeling and investment from top state leaders. National researchers on collective impact efforts have found that “too often, the expectation that collaboration can occur without a supporting infrastructure is one of the most frequent reasons why it fails.” [26]

Communication is also essential to working relationships, and public data reporting is an important way to partner with community members and engage a broad base of stakeholders in systems improvements. Maine’s child welfare system has a strong history as a national leader in cross-system collaboration. Our state has an obligation and an opportunity to renew this commitment to working more effectively with the community.

Action 4-A: Delegate a continuous quality improvement position within OCFS to establish procedures that will improve cross-sector collaboration in the field. Re-establish the Governor’s Children’s Cabinet to accomplish cross-system planning and leveraging of resources.

Our most vulnerable children and youth need child welfare and community organizations to work better together; we cannot afford to continue to operate in isolation. We have learned that successfully integrating safety, permanency, and well-being in child welfare practices requires an enhanced level of partnership between individuals and systems involved in the lives of families. Strong interagency and cross-system partnerships in Maine need to choose outcomes measures, allow for data and information sharing, and coordinate funding for long term sustainability of programs [27]. The Office of Child and Family Services (OCFS) has committed to improved sharing of responsibility with the community [28]. We urge the state to act upon this commitment by establishing a leadership position within OCFS that is dedicated specifically to continuous quality improvement [29] in collaborative practices, conducting research to understand barriers, and making the systemic changes needed to improve the ways we partner in the field.

We also encourage the administration to reinstate the Governor’s Children’s Cabinet [30]. Established in Maine statute [31], the Children’s Cabinet worked for many years to promote interdepartmental collaboration on children’s policy development and program implementation. We encourage the administration to review this statute, including Cabinet membership requirements, and to expand this section to include more members of the public. Reinstating the Cabinet will serve to support the provision of services for Maine families and children that are planned, managed and delivered in a holistic and integrated manner. It will also reflect that children and youth are a priority for our state and for this administration.

Action 4-B: Bolster the authority and role of the Maine Child Welfare Advisory Panel and the Child Welfare Ombudsman to review and publish data, research, and policy and appropriation recommendations to the Governor, Legislature, and public.

Maine has existing structures in place that support cross-sector problem-solving and public reporting. The Maine Child Welfare Advisory Panel (MCWAP) is a federally mandated, cross-sector group of professional and private citizens who are responsible for determining whether state and local agencies are effectively discharging child protective and child welfare responsibilities [32]. The group must prepare annual and triennial reports that contain recommendations to improve the child protective service system, and make these reports available to the public. Additionally, the State is required to respond to these recommendations in a final report.

The group responsible for meeting these federal mandates has changed names, members and format over the years, and as a consequence some previous practices (such as reporting annually to the public and the Legislative Health and Human Services Committee) were lost. In recognition of the role this oversight committee should be taking in building coordinated child welfare systems reforms, current MCWAP members renewed commitments and established new bylaws in 2018, and will be actively building representative membership in 2019. We recommend the state continue to provide support that bolsters the role and authority of this group in the development and oversight of child welfare system improvements. We also encourage related Legislative Committees (Health and Human Services, Government Oversight, Education and Cultural Affairs, Judiciary, Criminal Justice and Public Safety, Appropriations and Financial Affairs) to request reports from MCWAP annually.

The Child Welfare Ombudsman program is an independent program to provide services that protect the rights of children and families who are involved with child welfare. The program answers inquiries and conducts investigations, and works toward resolution of complaints. The Ombudsman program is required to report annually to the Governor, DHHS, and the Legislature each year on the activities and services of the program. These reports include identifying priorities based on types of inquiries and complaints, and making recommendations for changes in policy, rule or law to improve the provision of services [33]. As an independent party with detailed knowledge about specific cases and practices within child welfare, the Ombudsman program adds an important perspective to recommendations for system improvement. We encourage DHHS and Legislative HHS Committee to strengthen and ensure the role and authority of the Ombudsman's office as child welfare priority reforms are developed and implemented.

PRIORITY 5: PRIORITIZE PERMANENCY AND PREVENTION SERVICES

Overview: To promote the safety and well-being of children and families in Maine, we must strive to prevent child maltreatment. Trauma can be compounded by the removal of children from their families, loved ones, and communities and by adverse experiences in foster care. A growing body of research reveals negative long-term consequences of traumatic stress on physical, cognitive, social and emotional functioning for children and youth [34]. Investment in early intervention through services and programs that address the needs of vulnerable families is both humane and fiscally sound [35].

A strong system of care includes both prevention and intervention services that are responsive to the individual needs of families. Our priority should be to stabilize vulnerable families, and when children need to be removed, our priority should be to make efforts to reunify them with their biological family when it can be done safely. When reunification is not possible, we must move to create the most stable, permanent family situation we can, determined by the specific needs of each child. Even in cases where parental rights are terminated, where it is safe for the child, we should work to create a functional relationship between biological families and foster/adoptive families, so the child can maintain those significant relationships.

It is also critical that we invest in a broader and more effective spectrum of foster, kinship and alternative care. We currently do not have the necessary number of alternative placements to safely and permanently support children who are removed from their homes [36]. We must also ensure we have enough judges to expeditiously move child protective cases forward to reduce trauma and instability for children.

Action 5-A: Improve recruitment, licensing, training and support processes for foster and kinship families.

There is not an adequate supply of foster and adoptive parents currently in our state. To more effectively recruit and retain enough foster parents to provide stable home families for foster youth, we must acknowledge the changed picture of prospective foster parents today. And then we must provide the appropriate support for those families to ensure they are able to foster youth.

Current and prospective foster parents need more one-on-one support and guidance from caseworkers, to connect them with programs and services for the foster children in their care. Most families have two working parents today, including potential foster families. The state should do more to increase compensation, provide respite care, and reimbursements for summer camp and costs associated with foster youth participating in recreational activities.

We also must ensure foster parents are equipped to handle the difficult work of parenting a foster youth, through training (ACEs and Resilience 101, Self-Care Awareness, etc.) and ongoing support. Many prospective foster parents also face a substantial hurdle with the fire marshal code evaluation of their homes [37]. We cannot ask prospective foster parents to take on the financial burden of replacing their windows, abating lead from their homes, etc., to become foster parents. The state should operate a fund to help offset these costs.

For teen foster youth, a family placement may not be possible, or may be undesirable after multiple placements. We should look to how we can better support the transition to adulthood for those youth. Support for kinship placements [38], creating “host homes” [39] supports and investing in long-term foster youth group settings should be considered. We must ensure that children and youth in state care are never again placed in homeless shelters or hotels because we lack adequate alternative placements.

Action 5-B: Develop a transparent, data-based funding process for allocation of all prevention funds.

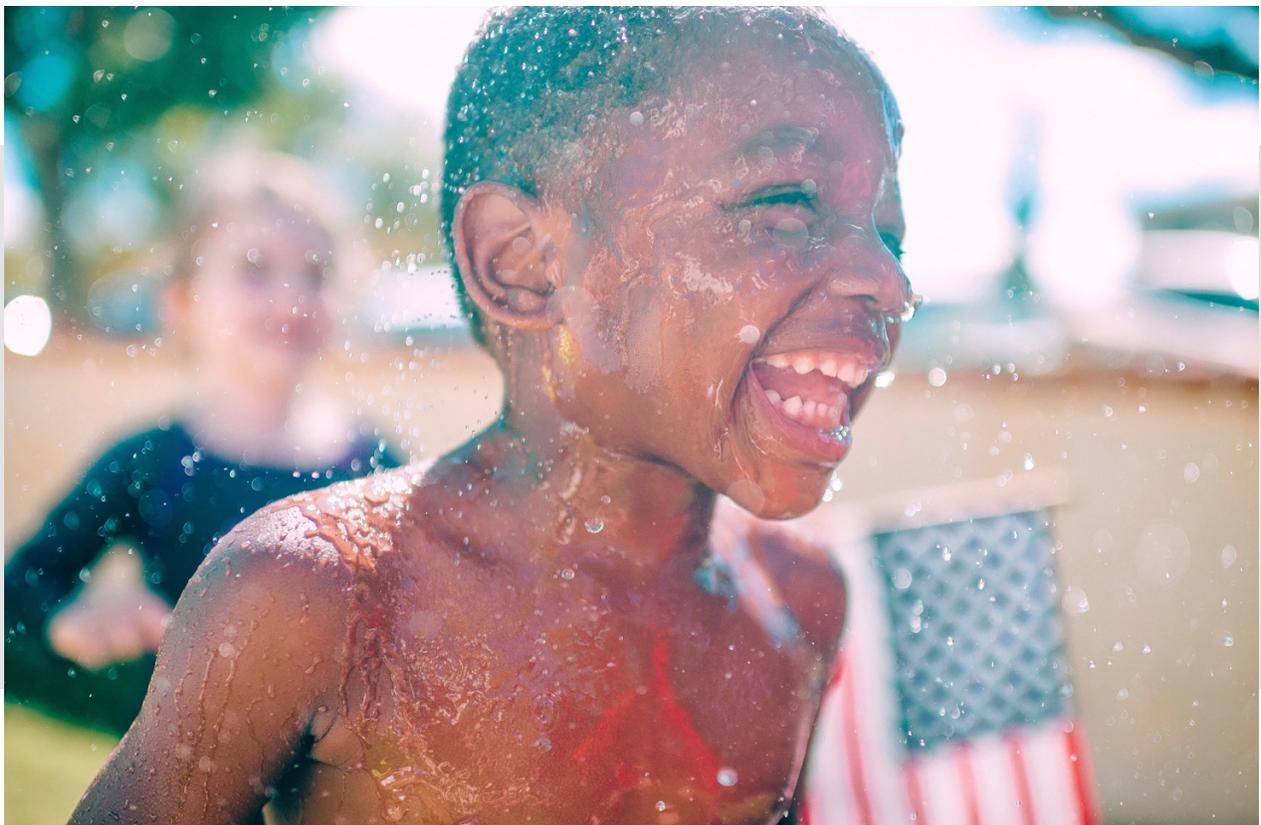
Prevention is a critical part of our child welfare system. Maine’s allocation of federal child welfare funds weighs heavily toward crisis intervention; far less goes to services intended to keep children out of state care [40]. While national reports provide the public with general information about prevention spending, there is currently no public reporting process for Maine’s prevention services. We encourage DHHS to develop a clear description of the state’s comprehensive system of child welfare prevention services [41], a process for reporting these services, and a schedule for reporting on these investments and outcomes to the public on a regular basis. This report should include both program and community data that is used to inform state decisions for strategically directing prevention activities and funds.

CALL TO ACTION

Every child has a right to grow up in a safe and supportive environment. We have an obligation and an opportunity to improve the way our child welfare system serves our most vulnerable children and families.

Successful child protection begins with prevention. Investing in responsive, accessible supportive services for families can prevent the need for child protective intervention. When intervention is necessary, our children and families have a right to a system that responds effectively. We call upon the new administration and legislature to move swiftly and thoughtfully to address systemic failures, improve our practices and strengthen our public and private partnerships. We stand ready to help.

Our children cannot wait.



WORKS CITED

- 1 Authors took the lead on compiling recommendations and references and drafting the paper. We want to thank the many individuals and organizations across Maine who contributed to the content. For more information, please contact Debra Dunlap debra.dunlap@cppcmaine.org, (207) 632-7737 or Melissa Hackett mhackett@mekids.org, (207) 623-1868 ext. 204.
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36 Maine saw a 45% increase in the number of children in foster care, from 1,268 in 2012 to 1,842 in 2016 (ME DHHS). But the number of people looking to become foster parents has dropped. As of July 1, 2018, there were 1,493 licensed foster homes (ME DHHS). That's down by more than 200 in just two years. <https://www.pressherald.com/2018/09/02/fewer-foster-parents-on-the-front-lines/>

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