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Child Welfare Annual Report

Calendar Year 2021

Submitted January 4, 2022

Maine Department of Health and Human Services
Office of Child and Family Services

Introduction

Since July of 2019, the Office of Child and Family Services (OCFS) has been working to implement system improvement initiatives identified in a comprehensive evaluation of Maine's child welfare system completed in 2019. These system improvement strategies were developed with input from staff, stakeholders, and national experts. Now, over two years into implementation of these strategies, OCFS has completed several initiatives and made significant progress on the remaining items.

This work continued during the COVID-19 pandemic, although the pandemic <u>affected</u> both the systems that care for families as well as the families themselves, contributing to tragic child deaths in 2021. While the strategies from 2019 continue to guide many system improvement efforts, these fatalities prompted OCFS to examine policies and procedures through the lens of these specific cases to determine if additional changes could be made to support child and family safety. This work was a continuation of OCFS' commitment to child safety, permanency, and wellbeing and conducted in conjunction with Casey Family Programs and Collaborative Safety. OCFS is pleased to provide this 2021 update that reflects implementation and system improvement efforts during 2021, as well as data and information on the system as it stands today.

Fully completed items are italicized below:

Safety

- ➤ Address Intake processes and improve staffing
- ➤ Re-assess the Alternative Response Program (ARP)
- ➤ Enhance Assessment processes

Permanency

- ➤ Develop a Permanency Review Process
- ➤ Monitor the Family Visit Coaching pilot to develop best practices
- ➤ Improve Structured Decision Making (SDM) tool consistency

Well-being

- Develop family engagement tools and training
- > Improve resource parent outreach and support

Staff Training and Support

- > Develop policy and training plan for new processes and tools
- Establish workforce wellness teams and education
- Update caseload size, standards, and ratios
- > Procure a replacement for the Maine Automated Child Welfare Information System (MACWIS)

Several of the completed initiatives have been discussed in previous reports, including the <u>2020 Child Welfare Annual Report</u>, and reference is made to those prior reports. Several initiatives, including re-assessing the Alternative Response Program and policy and training improvement efforts, will be discussed in this report. Efforts to effectuate the remaining strategies are all currently in progress.

Child Fatalities

The death of any child is tragic and has lasting impacts on families, communities, and the child welfare system. OCFS is committed to working to prevent child fatalities whenever possible. Following a number of child fatalities in June 2021, OCFS bolstered its commitment to transparency by expanding its public reporting to include quarterly updates on child fatalities. These updates include new fatalities and updates to previous year data where information has been approved for release by our partners at the Office of the Attorney General (who prosecute crimes related to child fatalities). This information is available on OCFS' website and will be updated quarterly on the following dates in 2022: January 15th, April 15th, July 15th, and October 15th.

It is also important to put Maine's experience in context. Data reflect that in Federal Fiscal Year (FFY) 2019 (the most recent year for which data is available) the national rate of abuse-related child fatalities per 100,000 children was 2.5¹. During that same period, the rate in Maine was 1.21, less than half of the national average. When the data are expanded to include all fatalities (not just those caused by abuse and/or neglect) Maine continues to fare better than the national average. In 2019, there were a total of 26 child fatalities or 14 deaths per 100,000 children in the state. During that same year there were 9,173 deaths or 16 deaths per 100,000 children nationally².

Those who work within this system care deeply about children and families and the recent high-profile cases involving child fatalities have been challenging for our staff and partners, our communities, and our State. OCFS will continue to seek improvements in the system focused on child safety and wellbeing and work collaboratively with staff and other child welfare stakeholders to ensure Maine is doing everything possible to protect all Maine children.

Safety Science

OCFS partnered with Casey Family Programs and Collaborative Safety to conduct a review of five child fatalities that occurred in the month of June 2021, utilizing a model based on safety science principles. Casey Family Programs is a well-respected, independent foundation with a focus on child and family safety, permanency and

wellbeing. Collaborative Safety has extensive experience conducting safety science critical incident reviews with child welfare organizations across the country.

Safety science originated in safety-critical industries such as aviation, health care, and nuclear power. It takes a system approach to examine the interactions among both internal components and external structures. The process included a technical review of case information and data related to these children and their families, debriefing interviews with staff to provide insight into how and why decisions were made at

Pandemic - Increased workload and reduced contacts with children and families

Turnover - Creates stress on completion and quality of work

Timeframes - Work has expanded while timeframes have not, impacting quality

Standby Staffing Patterns - Complex cases assigned to newer staff and non-investigation team members

Communication and Coordination with Providers - Behavioral health providers may shield parents from child welfare at the expense of child safety

Difficulty Engaging Caregivers - Unless court ordered, family engagement with child welfare is voluntary

Family Team Meeting Coordination - Lack of role clarity and variation by region in practice, training, and expectations

Communication Between Partners (Law Enforcement and Hospitals) - Child welfare staff may rely on child health information from law enforcement which may be limited

critical junctures in any previous involvement with the families, and the compiling of information into a mapping of key factors that looks at all aspects of the system. A multidisciplinary team was convened to work with

Collaborative Safety

¹ U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2021). Child Maltreatment 2019. Available from https://www.acf hhs.gov/cb/research-datatechnology/statistics-research/child-maltreatment.

² The Annie E. Casey Foundation (2021). Kids Count Data Center. Available from https://datacenter.kidscount.org/data/tables/22-child-deaths?loc=1&loct=1#detailed/1/any/false/1729,37,871,870,573,869,36,868,867,133/any/286,287

Collaborative Safety, including OCFS staff, partner agency staff, law enforcement, the Child Welfare Ombudsman, and staff of the Office of Program Evaluation and Government Accountability (OPEGA).

Collaborative Safety Recommendations



Work with a coalition of providers to support effective coordination with child welfare staff (e.g., supporting families, court and Family Team Meeting participation, sharing information, etc.) and address any identified barriers.



Establish joint protocol agreements between Law Enforcement, Hospitals and Child Welfare staff when there is suspected abuse or neglect to support communication and coordination.



Explore ways to support consistent practices, including role clarity and ongoing support for Family Team Meetings.



Explore ways to support engagement between parents and the child welfare system.



Continue to examine national best practices regarding standby and after-hours practices.



Examine national best practices for assessment timeframes and ensure that whatever timeframe is selected, it is compatible with the expected workload.



Conduct an analysis of current work tasks required in an assessment and remove any unnecessary and/or redundant tasks

The final report included casespecific recommendations for each child fatality. While that information cannot be shared publicly due to confidentiality laws and the ongoing prosecutions related to several deaths, Casey Family Programs and Collaborative Safety issued a public report that outlined eight key findings (overview on p. 2).

Those findings were then used to develop recommendations (left) for tangible actions that OCFS and its partners could take to improve the safety and wellbeing of children and families who interact with the child welfare system.

OCFS has carefully reviewed these action steps and developed plans to implement each recommendation. This work began in November of 2021 when OCFS issued an updated Family Team Meeting Policy to provide clear and consistent practice expectations. This is the culmination of work that was already underway by OCFS in collaboration with the Cutler Institute at the University of Southern Maine. The final policy was reviewed by both OCFS staff and the Maine Child Welfare Advisory Panel (including the Child Welfare Ombudsman), who provided input on the content of the policy.

OCFS also convened two stakeholder groups to address communication and coordination issues among the various components of the statewide child welfare system. One group includes behavioral health professionals, OCFS staff, and legal experts who will be developing guidance for clinicians that serve patients involved in the child welfare system. This guidance is meant to improve information sharing that informs child safety-related decisions.

The second group consists of hospital representatives, law enforcement (Maine Department of Public Safety), OCFS staff, and legal experts. This group will inform the development of template protocol agreements and training to improve communication among law enforcement, medical staff, and the Department in a manner that supports child safety.

OCFS is committed to further increasing the skills of staff with regard to parent engagement. This work includes the addition of parents with lived experience in child welfare policy and training teams to ensure their perspective is understood and informs policy and training development. OCFS is partnering with the Cutler Institute on this effort to ensure programs implemented are rooted in evidence.

Concerns about standby and afterhours coverage for child welfare have been consistently reported as one of the contributing factors to staff who decide to leave OCFS. In 2021, OCFS convened a workgroup of District staff to examine these practices. That resulted in practice changes implemented in October 2021, including increasing staffing on weekends and holidays, building in flexibility in the lengths of shifts, clarifying expectations for ongoing case assignments, and better defining the roles of caseworkers and supervisors who are providing afterhours coverage. Based on the recommendation from Collaborative Safety, OCFS has reconvened this workgroup to identify further improvements. In addition, OCFS is working with Casey Family Programs to learn how other states handle afterhours coverage in the hopes that best practices from around the country may serve to further improve our own system.

OCFS is also working to examine national best practices related to assessment timeframes. This information, along with feedback from staff and stakeholders, will be used to examine the current standards and make any changes necessary to balance the need for a timely response with the ability to complete a comprehensive analysis of available data to make well-supported child safety decisions. This will also include a review of the current assessment process to identify and remove any unnecessary or redundant tasks. This review will be commenced after the implementation of OCFS' new child welfare information system, known as Katahdin.

The reviews completed by Collaborative Safety were invaluable to OCFS in 2021 and OCFS is currently in the process of implementing safety science reviews as an ongoing part of child welfare operations.

Katahdin

As Maine seeks to eliminate inefficiencies and improve processes in the work of caseworkers and supervisors, one of the most important developments in 2021 was the continued development of a new Comprehensive Child Welfare Information System (CCWIS). OCFS staff have named this new system "Katahdin."

Katahdin is scheduled to go live in early 2022. Training for key District personnel who will serve as trainers and support staff for their offices has been completed.

During December and early January, child welfare staff (along with some from other areas of OCFS who will use Katahdin) will undergo intensive training to learn how to navigate the system. More



Katahdin Scope

Business Functions

- CPS Intake
- Investigation and Assessment
- · Case Management
- Interstate Compact for the Protection of Children
- Resource Management
- Financial Management
- Title IV-E Eligibility
 Determination for Foster
 Care, Adoption,
 Permanency, Guardianship,
 Social Security, Federal
 Reporting

Technical Requirements

- Integration with State's Document System -Docuware
- Federal Reporting, including AFCARS, NYTD, NCANDS, FFPSA, and Social Security
- Interfaces with required Federal and State systems
- Convert and migrate MACWIS data to CCWIS

Administration

- Staff Management
- Security Management
- Document Generation and Management
- Structured Decision Making Tool Access and Storage
- Reporting and Salesforce Einstein Data Analytics Tools

specialized trainings will also be provided, including Intake, Assessment/ Investigation, Permanency, and Adoption. OCFS' current information system, the Maine Child Welfare **Information System** (MACWIS) is planned to go into read-only mode to coincide with the launch of Katahdin, OCFS staff and staff from the contracted CCWIS developer, Deloitte, will convert all MACWIS data into Katahdin.

Once the system goes live the project enters a new phase to further refine and

improve the system, as well as add additional functionality that was not included in the initial scope of work. While these new functionalities are not key to the implementation of Katahdin, they further expand the opportunities for efficiency.

Family First

Another important development in 2021 was the approval of Maine's Family First Prevention Services Plan by the federal Administration for Children and Families (ACF). Maine was the first state in New England to have its plan approved by ACF. The plan spans five years and aligns OCFS' child welfare programs with the Federal Family First Prevention Services Act passed in 2018, enabling additional federal funds to be leveraged for Maine children. The intent of Family First is to reduce the number of children entering foster care by providing at-risk parents and families with supportive services such as mental health counseling, substance use treatment, and in-home parenting skill development. OCFS will be able to claim Federal Title IV-E reimbursement (on a 50% match basis) for the cost of providing evidence-based services to eligible families. Family First also requires participating states to improve standards for residential programs for children who require treatment for emotional or behavioral issues.

Approval of the plan and initiation of Family First in Maine, which occurred on October 1, 2021, will allow Maine to receive approximately \$2.4 million more annually in federal funds for evidence-based services that have shown effectiveness in keeping children safely in their homes, negating the need for more intrusive child welfare interventions, including removal of a child from their parents' care.

Since implementation began, OCFS has been working to expand the availability of Parents as Teachers (PAT), an evidence-based home-visiting parent education program. PAT has been available in Maine for a number of years through the Maine Families Home Visitors program, but with the implementation of Family First PAT will be expanded to serve more children and families.

Parents as Teachers (PAT) Eligibility under FFPSA

Previous PAT Eligibility

- Served children 0-3 years
- Referrals could be made from the prenatal stage to 4 months

New PAT Eligibility

- •Serves children 0-5 years
- Referral eligibility is expanded from prenatal to 4.5 years

OCFS is also in the process of standing up an intensive family preservation and reunification program known as Homebuilders. Homebuilders serves children ages 0-17 and their families. The goal is to provide high-risk families involved with child welfare with services to remove the risk of harm to the child (instead of removing the child) and give families the chance to learn new behaviors and help them better care for their children.

Significant research has been conducted on the trauma of removal of a child from their parents. While there will always be situations in which removal is warranted, OCFS is seeking (through Family First and other initiatives) to prevent the trauma of removal and allow families to safely and effectively care for their children whenever possible. In doing so, OCFS seeks to prevent the long-term harm that removal can cause by preserving families and increasing the level of family functioning to support parenting practices that ensure child safety and wellbeing.

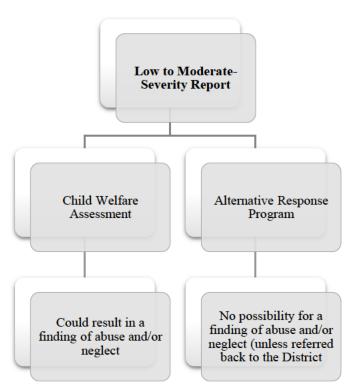
OCFS has dedicated significant time and resources to increasing education and information available to OCFS staff, providers, and families about the supportive services available to Maine families. Staff have attended a training ("Services and Supports for Maine Families"), OCFS has developed a Staff Toolkit regarding Family First, a Family Services Resource Guide is in development, and OCFS has retained Chapin Hall to conduct a small-scale gap analysis of the service array in Maine. In 2022, OCFS plan to provide training to service providers on working with families receiving child welfare services.

OCFS thanks those who have been involved in the planning and implementation efforts for Family First. Numerous providers and other stakeholders have played a critical role in development of Maine's plan and now its implementation. These include the Trauma Informed Care Committee, the Behavioral Health/Supportive Services Workgroup, and the Implementation Workgroup. OCFS was particularly fortunate to benefit from the willingness

of New Mainers, parents with lived experience in child welfare, and the Youth Leadership Advisory Team (YLAT) to participate in meetings and stakeholder groups to inform planning and implementation efforts. Additional information on the implementation of Family First is available on OCFS' website.

Contracted Services

Another development in 2021 was the decision to end the contracts for the Alternative Response Program (ARP). One of the identified strategies from 2019 was to "Re-assess the Alternative Response Program (ARP)." ARP is a longstanding service in Maine that provided a response on some low to moderate-severity reports of alleged abuse and/or neglect. When ARP received such a report, they would act much like a caseworker, meeting with the family, assessing safety, referring family members to services, etc. However, ARP lacked the authority to make findings of abuse and/or neglect.



As OCFS sought to examine and assess ARP, several concerns arose. Statute (22 MRS §4004) outlines the duties of the Department of Health and Human Services with regard to child protection. One of those duties is to, "promptly investigate all abuse and neglect cases and suspicious child deaths coming to its attention." After careful consideration OCFS determined that referring appropriate reports (even low to moderate-severity reports) to ARP was not in keeping with this duty. In addition, there were noted concerns about disparate outcomes for families based on whether their low to moderate severity report was referred to the appropriate district for investigation or ARP. ARP staff do not have the authority to make findings of abuse and/or neglect against caregivers in their work with families.

The decision to not renew the ARP contracts was announced in early 2021 with a planned end of the contracts on 12/31/21. Subsequent to that decision, the legislature extended the contracts through 6/30/22 to allow time to transition the caseload from ARP to OCFS staff. As a result of the decision to end the ARP contracts, OCFS sought and was granted 15 new

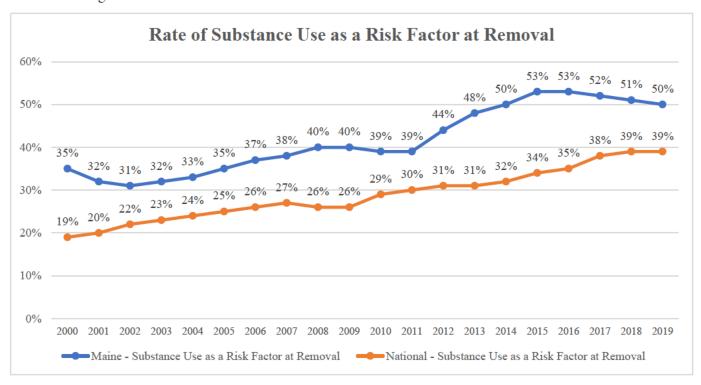
caseworker positions (10 effective 1/1/22 and 5 more effective 7/1/22) in the Budget. This number of staff was based on a careful analysis of current resources. This included examination of the number of staff required to ensure each report of alleged abuse and/or neglect determined to be appropriate for assessment will be assigned to a child welfare caseworker. The first 10 lines will be effective in January of 2022 and OCFS was permitted to begin advertising and working through the hiring process in late 2021. With the announcement of the end of the ARP contracts came some difficulty among ARP providers to staff their programs through the end of the contract term. The most recent information available from the providers indicates their current vacancy rate is approximately 70%.

OCFS is also aware of significant difficulties faced by other contracted service providers as they seek to hire staff in the current job market. Providers of two key services within child welfare, transportation and supervised family visitation, report significant difficulty hiring and retaining staff. OCFS has been utilizing staff (including a significant amount of support staff time) to provide transportation and supervision for visits. OCFS is actively working with providers to address these issues.

Though DHHS and OCFS determined that response to reports of abuse and neglect are core state functions and should be addressed by staff who are part of OCFS, providers who previously supported ARP services remain integral partners in the child welfare system in other ways.

Substance Use

Substance use continues to be a significant factor in the lives of many families involved with child welfare. In calendar year 2020, there were 504 fatal overdoses in Maine. In that same year, substance use was a risk factor in 50% of removals by OCFS. Both the number of overdoses and the percentage of removals with substance use as a risk factor has grown since 2000.



This rise in the percentage of removals with substance use as a risk factor is also reflected in national data (as shown above). The impact of substance use and, in particular, the opioid epidemic on children and families, has been significant. Beyond removal, when substance use is a factor in a case it takes, on average, an additional three months for children to reunify with their parents when compared to those cases that do not involve substance use.

Status of Children in Care

During 2021, there was a marked decline in the number of children in care. The is particularly notable because Maine has seen a steady rise in the number of children in care over the last few years.

Children should not spend more time in the custody of the State

then is necessary and OCFS has dedicated significant resources in the last two years to safe and timely exits to permanency - whether that be reunification with a parent, permanency guardianship, or adoption.

While children are in custody, OCFS has a <u>statutory</u> obligation to place them with family members whenever possible. National data indicates that on average nationwide around 35% of children in state custody are placed with relatives. Maine exceeds this national average with 41% of children in care placed in kinship care.

Youth in DHHS Custody



Maine also leads the nation with the lowest percentage of children in custody residing in congregate care settings.

Placement Type - 2021	Percent
Relative/Kinship Care	41%
Traditional Foster Care	34%
Therapeutic Foster Care	6%
Trial Home Placement	6%
Adoption	6%
Residential	3%
Other	3%
Unlicensed-Non Relative	2%

Using data from NCANDS and AFCARS the national average of the percentage of youth in custody who are in congregate care hovers around 10%. Several states exceed 15%. In Maine, only 3% of youth in custody are placed in a congregate care facility. None of these facilities is a group home (which are still used in many states). Instead, this number reflects only youth who are receiving services in residential treatment facilities due to mental health and/or behavioral health needs.

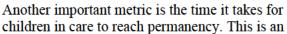
Maine is also performing better than the national average in the area of placement stability. This metric is measured by looking at all children who entered foster care in 2020 and the rate of placement moves per

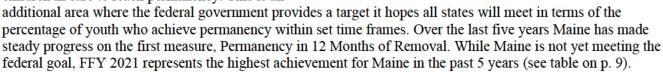
1,000 days in foster care. Maine's rate is 3.1 compared to the national average which is just over 4.

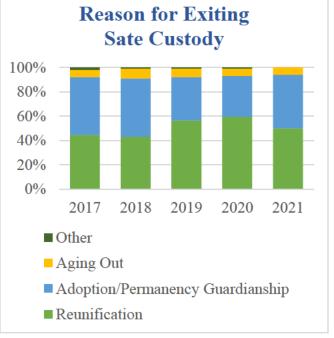
OCFS tracks the safety of children in state custody using a federal metric that looks at the rate of abuse of children while in the care of the state. The number is calculated by dividing the number of instances of abuse and/or neglect by the total number of days that all children spent in State custody. The ratio of this report is per 100,000 days spent in state custody. While the goal is always no abuse occurring, the most recent data available (October 2021) reflects that Maine's rate was 8.17, which is better than the national standard set by the federal government to monitor

States' performance (8.5). In Maine, this data reflects all instances of substantiated or indicated reports of maltreatment regardless of the perpetrator, including findings made against child care providers, behavioral health providers, parents during visits or trial home placements, and resource parents.

When children in custody exit care, the majority are doing so to reunification. In FFY 2021, 50% of all exits from custody were to reunification while 44% were to adoption or permanency guardianship. This is in line with the national average regarding reunification which hovers around 50%. OCFS' goal is to reunify children with their parents whenever safely possible and the current rate of reunification is a significant increase from Federal Fiscal Years 2017 and 2018 when 45% and 43% of exits (respectively) were to reunification.







The second goal reflects those achieving permanency in the second year they are in state custody. Maine has not met the federal goal in this area in the last two years. Given the high rate of removals that involve substance use and the significant amount of time it can take for a parent to successfully engage in substance use treatment and demonstrate sustained recovery, it is not surprising that while Maine's reunification rate remains in line with the national average, it is taking more time for reunification to occur. OCFS is hopeful that processes and improvements put into place in the last year will help to make progress with this metric. In particular, OCFS has implemented a Permanency Review Team (PRT) process which focuses on ensuring that children achieve safe, timely permanency within expected timeframes and that staff identify and address barriers to reunification or termination of parental rights and adoption. In addition, as part of the Program Improvement Plan, OCFS, the

Office of the Attorney General, and the Maine Judicial Branch are implementing a pilot transformational zone focused on effective engagement of parents and caregivers in the legal process.

		Maine Metrics					
Federal Permanency Measures	Federal Goal	FFY 2017	FFY 2018	FFY 2019	FFY 2020	FFY 2021	
Permanency in 12 Months of Removal Of all children who enter foster care in a target 12-mo period, percent discharged to permanency within 12 months of entering foster care.	40.5%	26.5%	29.0%	30.9%	26.7%	32.5%	
Permanency in 12 Months for Children in Foster Care 12 to 23 Months Of all children in foster care on the first day of a 12-mo period who had been in foster care between 12 and 23 months, percent discharged from foster care to permanency within 12 months of the first day of the 12-mo period.	43.6%	64.4%	61.6%	50.7%	40.5%	40.6%	

Policy

In 2021, OCFS continued work with the Cutler Institute at the University of Southern Maine under a Cooperative Agreement. This has resulted in several policies undergoing thorough review and updating. The OCFS process for policy development and implementation includes allowing staff to provide input and discussing policy updates with OCFS' Citizen Review Panel, known as the Maine Child Welfare Advisory Panel (MCWAP). MCWAP is comprised of a diverse group of individuals with experience in child welfare and child welfare-related disciplines, including the Child Welfare Ombudsman, parents formerly involved with child welfare, OAG staff, provider staff, and members of the Maine Judicial Branch's Family Division.

Policies updated in 2021 include:

- ✓ Interstate Compact on the Placement of Children (ICPC)
- ✓ Safe Haven Policy
- ✓ Staff Safety Policy
- ✓ Immunization Policy
- ✓ Family Team Meeting (FTM) Policy

In addition, OCFS expects to update several more policies that are in the finalization process, including:

- Human Trafficking and Commercial Sexual Exploitation of Children Policy
- Youth Transition Services Policy
- Placement with DHHS Employees Policy

This work will continue in 2022 with the goal of reviewing and updating the entire Child and Family Policy manual.

Staff Development

OCFS publishes an annual workload report in January of each year and data on workload, turnover, and other workforce related topics will be provided in that report. OCFS looks forward to being able to provide a full picture of OCFS' workforce using complete calendar year data.

OCFS has spent significant time in 2021 working to develop sustainable strategies to build and maintain a strong workforce. Chief among these are efforts to revive the Field Instruction Unit (FIU) which provides college students pursuing a degree in social work with the opportunity to work within OCFS to gain college credit, including

attending Foundations Training and undertaking other efforts to prepare them to work for OCFS upon graduation. OCFS previously had an FIU and noted that many of the staff who have stayed with OCFS and become leaders as supervisors, assistant program administrators, program administrations, and regional associate directors had started their time with OCFS in the FIU.

The FIU will provide benefits for both the students and OCFS. Students will receive college credit and a small stipend to compensate them for the work they are doing beyond that of an intern. OCFS will benefit from the assistance of these students and the availability of social work graduates with experience in child welfare. Child welfare is complex and difficult work and the FIU gives students experience to determine if child welfare is a good fit for them. OCFS looks forward to launching the FIU in 2022 with the assistance of the Cutler Institute.

Over the previous year, OCFS has also developed and implemented a system of clinical support services for child welfare staff statewide. OCFS has contracted with Spurwink to provide this service which includes ongoing support and a structured response to critical incidents which have historically had a significant impact on staff. OCFS has received positive feedback on the clinical support services from staff throughout the state.

Conclusion

Child welfare services faced a number of challenges in 2021, particularly given the ongoing impact of the COVID-19 pandemic on all Mainers, but OCFS has also made significant progress toward system improvement over the last year. OCFS continues to seek to learn from tragic child fatalities to improve the child welfare system. With the help of Casey Family Programs and Collaborative Safety, OCFS was able to view these losses through a new lens that aided OCFS in understanding what happened and why and what could be done in the future to prevent similar outcomes. This has resulted in real and actionable recommendations that OCFS is working to implement, along with the 2019 system improvement efforts.

OCFS staff are its greatest asset and supporting them is key to ensuring the safety and wellbeing of Maine children and families. Throughout 2021, child welfare staff have continued to demonstrate professionalism and incredible dedication to their work. In 2022, OCFS will continue to work to update and improve policy, maximize the potential of trainings available to staff, provide opportunities for staff to give input on improvements to the child welfare system, and ensure access to clinical support for all child welfare staff.

In 2022, OCFS is looking toward implementation of the Katahdin system in January and ongoing work to build OCFS' prevention system of care under Maine's Family First Plan. OCFS also plans to fully incorporate Safety Science into its work, allowing the agency to build a structure for critical incident reviews that will continue to inform improvements to the child welfare system in 2022 and beyond. OCFS expects COVID-19 to continue to present new and unique challenges to the work of OCFS, from the day to day work of caseworkers to the ongoing system improvement work. Despite this, OCFS will continue to work to align resources and systems to best support Maine's children and families in leading safe, stable, happy, and healthy lives.