DATE: August 12, 2010

POLICY #: SSA # 11-08

TO: Local Department of Social Services Directors, Assistant Directors, and Out of Home Placement Supervisors Directors of Local Department

FROM: Carnitra D. White, Executive Director Social Services Administration

RE: Adoption Incentive Funds

PROGRAM AFFECTED: Out of Home Placement Services – Adoption Permanency

ORIGINATION OFFICE: Child Welfare Practice and Policy

ACTION REQUIRED: All Child Welfare Services Staff

REQUIRED ACTION: Allocation and Implementation of Adoption Incentive Funds

ACTION DUE DATE: Immediately

CONTACT PERSON: Deborah Ramelmeier, Director Office of Child Welfare Practice and Policy Social Services Administration (410) 767-7506

PURPOSE
The purpose of this Policy Guidance Memorandum is to provide guidance to local departments on using Adoption Incentive funds awarded by the federal Department of Health and Human Services for exceeding the adoption finalizations goal for FY 2009.

BACKGROUND
The Adoption Incentive Payments Program originally was created as part of the 1997 Adoption and Safe Families Act (ASFA). Under this law, adoption bonuses provided incentives to promote the adoption of children from the public child welfare system, with an additional incentive to promote the adoption of children with special needs. The program was reauthorized for the third time with the passage of the Fostering Connections to Success and Increasing Adoptions Act of 2008. Maryland's last award was given for 968 adoptions achieved in FY 2002.

GOALS
The goals are as follows: (1) To facilitate stabilization of an adoption placement prior to finalization; (2) To help maintain an adoption after finalization; and (3) To recruit families for older children and children of any age who present challenges that hamper identification of family resources for adoption.

FUNDING
For the 770 adoptions achieved in FY 2009, Maryland received an award of $196,000. $149,000 will be disbursed among the local departments. $47,000 will be applied to the cost of linking the Maryland Adoption Resource Exchange (MARE) database to MD CHESSIE. The adoption incentive funds that will be distributed among the local departments must be used for services given prior to finalization and for post adoption services to children and families who are Maryland residents. Funding account categories are as follows: (1) child welfare administrative funding at the local department level; and (2) child welfare administrative funding at the Social Services Administration level. Refer to Appendix A for the table containing the funds allocation for each local department.

The local department account contains funds to pay for the following:
(a) Pre-finalization services to children in Out of Home Services-Permanency/Foster Care placements. Pre-finalization direct client services may include provision of supports that will facilitate inter-county adoptive placements and adoptive placements considered difficult. These supports may include travel expenses for pre-placement and post-placement phases of the adoption prior to finalization, respite care and any other supports not covered by any other funding resource for children in foster care.
(b) Pre-finalization recruitment activities designed to increase the number of adoptive families for children in foster care. Pre-finalization recruitment services may include identifying potential adoptive families for children with a permanency plan of adoption through a variety of means including special photolisting, and other recruitment events such as matching events.
(c) Direct client post-adoption services to children adopted from Out of Home Services-Permanency/Foster Care placements, and their families. Post-adoption services may include medical treatment, mental health services, respite care services, education services, camp, and other direct client services for which families need financial help to cover costs.

Funds must be obligated no later than September 30, 2011 and liquidated no later than December 31, 2011.

ELIGIBILITY
A. Eligible children are:
(1) foster children with a permanency plan of adoption for whom identification of adoptive families has been difficult, in particularly older youth and children with very challenging special needs;
(2) foster children with a permanency plan of adoption for whom families living in other counties or states have been tentatively identified but who need additional funding to facilitate inter-jurisdictional placements;
(3) children in adoption placements in which the transition from foster care to adoption is difficult; and
(4) children who have been adopted and are in need of direct client services.

B. Eligible families are:
(1) For pre-finalization services, adoptive families who have been identified as placement resources for foster children with a permanency plan of adoption but who have not yet finalized their adoptions.
(2) For post adoption services, adoptive families who have adopted children for whom the Maryland local departments of social services had responsibility prior to their adoptions.

REQUEST FOR FUNDING
(a) For children with a permanency plan of adoption for whom the local department is seeking an adoptive family resource, caseworkers may request funds for recruitment services or any preparatory services for which there are no other funding sources. The local department's designee for approval of funds must give approval at this point. The local department designee for funds approval will track the distribution of funds, usage, and outcomes.

(b) For Pre-finalization Services that occur during pre-placement and post placement phases of an adoption placement, the caseworkers and adoptive parents will determine the needs of a child and family. If a service is needed to stabilize a placement for which there are no other viable funding resources, the caseworker will confer with the supervisor, note the need for a service in the case record in MD CHESSIE, and plan to access funds. The local department's designee for approval of funds must give approval at this point. The local department designee for funds approval will track the distribution of funds, usage, and outcomes.

(c) For Post Adoption Services, a family must request services from the local department in the county jurisdiction in which the family resides. These funds are available for children who are Maryland residents adopted from caseloads of local departments in Maryland. Families must
provide documentation of need. The local department's designee must approve the request for funds.

Families must request services from their county local department. Baltimore City residents must request services from the Baltimore City DSS.

PAYMENT FOR SERVICES
All payments are to be made outside of MD CHESSIE as the incentive funds program is temporary. Funds have been added to the child welfare administrative code account 330700/n00g00. DIRECT SERVICES provided to children still in care are to be charged to CICS Project Code 0305.14 and Object code 0856. In submitting the payment to the local department finance office, the caseworker will attach a screen shot of the completed Service log entry for agency provided services. (See Documentation of Utilization of Incentive funds for more details)

POST ADOPTION services are to be charged to the same child welfare administrative code account 330700/n00g00, CICS Project/Sub-project 0305.14 and object 0856.

Everything else, such as services and fees for general recruitment activities, are to be charged to object and sub-object codes routinely used to pay for these items.

DOCUMENTATION OF UTILIZATION OF INCENTIVE FUNDS IN MD CHESSIE
1. Children in Out-of-Home Services
   Document the use of Incentive funds for services for children with a permanency plan of adoption with an out-of-home program assignment, and pre-finalized adoptive placements.
   a. Create a Service Log for Agency Provided services. Identify the type of Service Category and note the Type of Service that was provided to the child. A screenshot of this information must be shared with the finance department.
   b. Documentation should also be done in the Case Contacts by using one of the three Contact Reasons: (1) Post placement; (2) Placement Disruption; or (3) Placement Coordination. In the Comments field, note specific information about the service provided. Also check, the (4) "Document contact type for hard copy”.

2. Post Adoption Services
   a. Create a new referral for Post Adoption Services and open a new service case for In Home Services/Family Preservation case. The family must have a program assignment of In Home Services/Family Preservation – Services to Families with Children Intake.
      1) Create a service log for agency provided services. Identify the type of Service Category and note the Type of Service that was provided to the child. A screenshot of this information must be shared with the finance department.
      2) Documentation should also be done in the Case Contacts by using one of the three Contact Reasons: (a) Post placement; (b) Placement Disruption; or (c) Placement Coordination. In the Comments field, note specific information about the service provided. Also check, the (d) "Document contact type for hard copy”.
   b. If the child receiving services was adopted from a local department caseload but never had a case in MD CHESSIE, the following actions must be done.
      1) Verify adoption by obtaining a copy of the decree or other proof of the adoption.
2) Include the following information with documentation of the need for service:
   a) History of presenting problem including resources used by the family to resolve problem, and the results of prior assessments and treatment (Staff should obtain documentation of prior assessments and treatment);
   b) Child’s current medical, mental health, social-emotional, educational status; and
   c) Determination that all other funding resources have been exhausted.
   All this documentation must be done, for accounting and auditing purposes. Use the attached form which is to be kept in a file separate from MD CHESSIE.
3) Then create a Referral for Post Adoption in MD CHESSIE. Follow the steps above in 2 a.

DOCUMENTATION OF OUTCOMES
Local department staffs are to report quarterly details of the services purchased with the incentives funds, using the Adoption Incentives Funds – Outcomes form. Refer to Attachment B. Local department staffs are to use this form until notified to discontinue reporting.

It is imperative that local department staffs report monthly detailing the support services purchased with the adoption incentive funds, the results of the services rendered, and any referrals or applications denied using the Adoption Incentives Funds – Outcomes form.

LOCAL DEPARTMENT INQUIRIES
Local department staffs should direct inquiries about this program to Eloise Mooney at emooney@dhr.state.md.us or at 410-767-7359.
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Attachment B

Adoption Incentive Funds Program-Outcomes Report

Agency __________________________
1st Quarter 2010 (July, Aug., Sept.) __________________________ (Date submitted)
2nd Quarter 2010 (Oct., Nov., Dec) __________________________ (Date submitted)
3rd Quarter 2011 (Jan., Feb., Mar.) __________________________ (Date submitted)
4th Quarter 2011 (Apr., May, June) __________________________ (Date submitted)
5th Quarter 2011 (July, Aug., Sept.) __________________________ (Date submitted)
6th Quarter 2011 (Oct., Nov., Dec.) __________________________ (Date submitted)

<table>
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<tr>
<th>Child and Family (First &amp; Last Names)</th>
<th>Referral Decision-Accepted or Denied (Reason for denial)</th>
<th>Service Provider (Name – Address)</th>
<th>Services Funded (Give amount and specific information on type of service including vendor)</th>
<th>Results of Services (Include beginning and ending dates and impact of service)</th>
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INSTRUCTIONS FOR USE OF POST ADOPTION INCENTIVE FUNDS PROGRAM – OUTCOMES FORM

1. *Agency.* Fill in name of local department
2. *Quarter.* Fill in date form is submitted by the applicable quarter.
3. *Child and Family.* Insert first and last name of child and first and last name of parent(s).
4. **Referral Decision.** Insert decision to accept or reject the referral. If rejected, provide the reason(s).

5. **Service Provider.** Insert first and last name of provider, name of provider’s company if different from name and provider’s address.

6. **Services Funded.** Provide information on the actual service provided, for example a specific type of counseling, a specific type of educational or medical treatment, etc.

7. **Results of Services.** Describe the impact of service. Include the beginning and end dates.