



House Judiciary Committee
February 20, 2025 Bill Hearings - Child Welfare Bills Follow Up
March 3, 2025

HB1209 - Child Abuse and Neglect - Reports and Records - Disclosure

Clarifying news reports about child fatalities:

In previous federal reports we overcounted child fatalities related to maltreatments. The National Child Abuse and Neglect Data System (NCANDS) requires states to report child fatalities when an investigation determines maltreatment is "substantiated or indicated."

We reviewed our previous NCANDS reports. In prior reports we erroneously included child fatalities with investigation findings where maltreatment was "unsubstantiated" and "ruled out."

When an investigation of a child fatality results in a finding that maltreatment is indicated, it does not necessarily mean that maltreatment directly caused the child's death. Frequently, maltreatment was a contributing factor that made the child's death more likely. An example of when neglect makes a child's death more likely is when a parent leaves an infant home alone while they go to the store and returns home to discover the child unresponsive in their crib. While they did not directly cause the death of the child, leaving the child unattended was a contributing factor to the child's death..

In Maryland, neglect is only found when the maltreater is a parent or a caregiver. A neglect finding does not require that the maltreater intended to neglect the child. Abuse can be found when the maltreater is "a parent, household or family member, caregiver, or authority figure and the action of a caregiver is an "intentional act or reckless disregard for the child's health or welfare causing the injury."

In federal fiscal year 2023, there were 47 child fatalities in which maltreatment was indicated. There is no upward trend in maltreatment-related child fatalities year over year. Additionally, the number of Maryland children reunified with family within five years preceding a child fatality is below the national average. In 2023, there was one child fatality that occurred within five years of family reunification.

The updated table below supplements Exhibit 20, page 37 of the Department of Legislative Services' Analysis of the [FY2026 DHS Social Services Administration budget](#).

NCANDS Year	# of INCORRECT Maltreatment Fatalities submitted to NCANDS	# of CORRECT Maltreatment Related Fatalities	# of Maltreatment Related Fatalities with Family Preservation services in previous 5 years	# of Maltreatment Related Fatalities that were Reunified with their family in previous 5 years*
2020	50	30	11	1
2021	84	56	18	1
2022	68	40	12	1
2023	83	47	8	1
2024	N/A	46	15	1

**All children in the "Reunification" category are also included in the "Family Preservation" category.*

NCANDS: National Child Abuse and Neglect Data System

We provided updates to NCANDS for our 2020 through 2023 data.

Committee Questions

HB1209 - Child Abuse and Neglect - Reports and Records - Disclosure

- 1. How does the Department record instances of child abuse and neglect? Why is confidentiality for child victims important?**

Response

The Child, Juvenile, and Adult Management System (CJAMS) is the system of record for child maltreatment in Maryland and houses maltreatment case files. The circumstances for each case of alleged child maltreatment are documented in individual case notes within the case file. Every child maltreatment investigation results in a determination of whether allegations of abuse or neglect were indicated, unsubstantiated, or ruled out. [Maryland Family Law §5-701](#) defines each of these findings. An indicated finding means that there is credible evidence, which has not been refuted, that abuse or neglect did occur. An unsubstantiated finding means that there is insufficient evidence to support a finding that abuse is indicated or ruled out. If an investigation results in a "ruled out" finding then abuse or neglect did not occur.

Ensuring confidentiality protects children victims from additional harm and encourages members of the public to report suspected maltreatment. If people fear that their reports will become public knowledge, they may hesitate to report suspected maltreatment. Confidentiality for child victims is important because

public disclosure of a child's identity or case details can compromise an investigation, create stigma and embarrassment, or prompt retaliation. Keeping a child's information private also minimizes additional psychological harm. Exposing a child's traumatic experiences to the public or peers can retraumatize a child.

2. What does the federal CAPTA law specifically require regarding disclosure?

Response

CAPTA requires that a State preserve the confidentiality of all child abuse and neglect reports and records in order to protect the rights of the child and the child's parents or guardians (section 106(b)(2)(B)(viii) of CAPTA). CAPTA also allows the State to release information to certain individuals and entities.

The State may share confidential child abuse and neglect reports and records that are made and maintained in accordance with CAPTA with any of the following:

- Individuals who are the subject of a report (section 106(b)(2)(B)(viii)(I));
- A grand jury or court, when necessary to determine an issue before the court or grand jury (section 106(b)(2)(B)(viii)(V)); and
- Other entities or classes of individuals who are authorized by statute to receive information pursuant to a legitimate State purpose (section 106(b)(2)(B)(viii)(VI)).

In addition, States can choose to allow public access to child maltreatment court proceedings when the State, at a minimum, can ensure the safety and well-being of the child, parents, and families. (See the last paragraph of section 106(b)(2) of CAPTA).

The State must provide certain otherwise confidential child abuse and neglect information to the following:

- Any Federal, State, or local government entity, or any agent of such entity, that has a need for such information in order to carry out its responsibilities under law to protect children from abuse and neglect (permitted by 106(b)(2)(B)(viii)(II) but required by section 106(b)(2)(B)(ix));
- Child abuse citizen review panels, if such panels are established to comply with section 106(c) of CAPTA (permitted by 106(b)(2)(B)(viii)(III) but required by section 106(c)(5)(A));
- Public disclosure of the findings or information about the case of child abuse or neglect that results in a child fatality or near fatality (required by section 106(b)(2)(B)(x)), in accordance with section 2.1A.4, Q/A #8 of the CWPM; and

- Child fatality review panels. Although disclosure to such panels is merely permissible under the language of section 106(b)(2)(B)(viii)(IV), section 106(b)(2)(B)(x) of CAPTA requires disclosure of findings or information about the case of child abuse or neglect that results in a child fatality or near fatality. Accordingly, disclosure to a child fatality review panel is required.

Authorized recipients of confidential child abuse and neglect information are bound by the same confidentiality restrictions as the child protective services agency. Thus, recipients of such information must use the information only for activities related to the prevention and treatment of child abuse and neglect. Further disclosure is permitted only in accordance with the CAPTA standards.

*More information can be found on the [ACF website](#)

HB0649 - Family Law - Children in Foster Care - Background Information

1. *How does the disclosure of confidential information to resource parents work?*

Response

[COMAR 07.02.25.12 - Rights of a Resource Parent](#) and [SSA 06-11 Child Placement Information Form Policy](#) outline the requirements and process for disclosing information about a child in out-of-home care to resource parents. Local departments of social services are required to share information known about the child before the child is placed in the resource home and upon learning new information. The comprehensive Child Placement Information Form (included in the Child Placement Information Form policy) is required to be shared with and signed by resource parents. The form includes information about the child's physical health, mental health, behaviors, reason for entering out-of-home care, placement history, educational background, Department of Juvenile Services involvement, and pending charges.

2. *Do waivers need to be signed for medical and educational history?*

Response

Waivers do not need to be signed to disclose medical history to a resource parent. The comprehensive Child Placement Information Form (included in [SSA 06-11 Child Placement Information Form Policy](#)) is required to be shared with and signed by resource parents. The form includes information about the child's physical and mental health.

Waivers do not need to be signed before disclosing education history to resource parents. Consistent with the requirements of the Family Educational Rights and Privacy Act, 20 U.S.C. §1232g (FERPA), the Local Education Agency will provide information to the Child Welfare Agency relating to the school enrollment and school performance of students in foster care, including information relating to attendance, grades, and school disciplinary action, without prior consent of the parent or eligible student. Such information sharing ensures that each student's educational needs are met and also improves the academic outcomes for these students.

The Child Welfare Agency (CWA) will re-disclose information only to third parties (such as foster parents) authorized by the CWA to address the student's educational needs, as permitted by FERPA. Pursuant to §1-201(a) of the Human Services Article, all information shared between the Parties is strictly confidential and shall not be re-disclosed, divulged, nor made known to any other party, outside of certain exceptions.

3. How long does it take to get medical and educational history? Does it come in slowly or all at once? Does it vary based on placement?

Response

Education History When the youth first enters care, depending on their grade, it can take several weeks to gather their prior educational information. It can take longer when a child attends multiple schools or schools out of state. Initially, we may only know their most recent school, current grade level, and if they have a current IEP. The caseworker must conduct a best interest meeting with the youth's current school and the school serving the foster care placement to determine if the child should transfer schools. If they decide the child should transfer, then the schools are responsible for transferring student records ([COMAR 13A.08.07.03-2](#)). Once a youth is in care, the foster parent is the school's point of contact and receives daily information from teachers, progress reports, etc. Case managers are expected to track school performance and obtain copies of all report cards, disciplinary reports, and special education plans. Case managers are required to retain these documents so they are available if there is a placement change.

Medical History The length of time to obtain a child's medical history after being placed in foster care varies. Some medical records may have been collected to support the CPS investigation or identify health needs when engaging with a family prior to foster care placement. This information may be reflected in the child welfare system of record (case notes; uploaded medical records) or shared with the foster care worker during the transition. However, once the child is placed in foster care the Health Passport form 631-F (consent to health services & release of medical records)

must be completed. It may take longer to obtain medical information if the parent does not consent or the agency needs to petition the court for medical guardianship. Additionally, once the agency obtains consent or medical guardianship the timeline for receiving medical records depends on the individual medical provider's process. Since medical facilities or providers across Maryland operate independently their processes may increase the time to obtain the child's medical history.

4. How would the divulging of criminal backgrounds work if records are sealed when a juvenile is found delinquent?

Response:

When a child or youth is in out-of-home care, the local department of social services is required to share known information about the child or youth with the resource parents. [SSA 06-11 Child Placement Information Form Policy](#) The same requirements apply when a youth in out-of-home care is involved with the Department of Juvenile Services and has pending charges. Local departments of social services are not required to run background clearances on children and youth who enter out-of-home care.