

**CHILD WELFARE SERVICES
OMBUDSMAN**

ANNUAL REPORT 2003

Maine Children's Alliance
303 State Street
Augusta, ME 04330

CHILD WELFARE SERVICES OMBUDSMAN ANNUAL REPORT

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PROGRAM SUMMARY

Program Development:

On January 16, 2003, The Maine Children's Alliance (MCA) was awarded the contract to operate the Child Welfare Services Ombudsman program for the Executive Department. Operation of the program began immediately, and the first case was opened on February 2, 2003. As of December 24th, the Ombudsman had responded to 103 calls for assistance and/or information.

The Ombudsman program was established under Title 22, M.R.S.A. Chapter 1071-§4087-A. (see Appendix E). The Ombudsman program may:

- Provide information to the public about the Ombudsman program
- Answer inquiries, investigate and work toward resolution of complaints
- Determine priorities for complaints, and policies and procedures for operation of the program
- Participate in conferences, meetings and studies whose purpose is to address child welfare issues
- Provide information and referral services
- Inform people about how to obtain services from the Department
- Collect and analyze data for the purpose of making such reports as may be required
- Analyze and provide opinions and recommendations to agencies, the Governor and the Legislature on state programs, rules, policies and laws

MCA, in its development of the Ombudsman program has undertaken activities, developed policies and procedures, and recruited staff and volunteers consistent with State Statute and the contract with the Executive Department.

The table on the following page contains a task list of activities for the Ombudsman program's first year. These tasks were identified in the Ombudsman contract and are the actions taken in establishing the program.

Accomplishments for 2003

Task	Completed	Currently working on
Identify liaisons within state government	✓	
Develop policies and procedures	✓	
Develop record keeping forms and file system	✓	
Develop database	✓	
Create Ombudsman portion of Maine Children's Alliance website	✓	
Complete report on other state ombudsman programs	✓	
Revise policy and procedures based on national review		✓
Recruit Assistant Ombudsman	✓	
Negotiate referral relationship with other Information and Referral providers	✓	
Begin providing Information and Referral services	✓	
Begin receiving inquiries and complaints	✓	
Develop agreement with Program Administrators for office space as needed	✓	
Develop regular meeting schedule with DHS central office staff	✓	
Meet with key staff in other state agencies (DBDS, DOC)	✓	
Develop training curriculum for volunteers	✓	
Recruit and train volunteers	✓	
Develop brochure for Ombudsman program	✓	
Distribute Ombudsman brochure	Ongoing	
Negotiate protocols with MCA partners in Medicaid outreach collaborative	N/A	
Negotiate and begin to implement plan for outreach to children in DHS care		✓
Collect, revise and/or develop informational materials about DHS services and related services	Ongoing	
Make recommendations for curriculum revisions with DHS for foster parent and staff training	✓	
Negotiate distribution of information with other state agencies		✓
Develop media campaign for radio, TV and print media		✓
Attend committee meetings and other external meetings necessary for the role of Ombudsman	Ongoing	
Develop report format for quarterly reports	✓	

Program Research:

As part of the contract with the Governor, MCA agreed to continuously seek new ways to improve the provision of Ombudsman services through research. For that reason we undertook a review of ombudsman programs in several other states. A summary of that review can be found in Appendix A called, “A Comparison of State Ombudsman Programs and Identification of Promising Practices”.

We also gathered information about several in-State programs that utilize volunteers. Three programs graciously agreed to assist us. Summary information of these programs is attached as appendices:

- Brenda Gallant and her staff at Maine’s Long Term Care Ombudsman office (Appendix B)
- Jane Morrison and her staff at Ingraham Volunteers (Appendix C)
- Naira Soifer and her staff at the Court Appointed Special Advocate Program (CASA) (Appendix D)

Our research has resulted in several program improvements which include:

- Adding significant information to our website
- Borrowing from Washington State’s Ombudsman Program to streamline our intake process
- Refining our use of volunteers
- Revising our case record structure
- Improving our training program for volunteers

In addition, we have made a change in our process for resolution of individual cases. The Governor’s Chief Counsel, in consultation with the Attorney General, determined that neither the Statute nor the Contract gave the Ombudsman the authority to issue case specific reports. Reports will be quarterly and will focus on policy issues observed through casework. Communication with complainants and the Department around individual cases will be informal. Please see Letter from Kurt Adams, Governor’s Chief Counsel (Appendix F).

Networking Activities:

The Ombudsman has reached out to a wide variety of agencies, groups and individuals for the purpose of collaborating. We have met with the following people, groups and agencies:

- Adoptive and Foster Families of Maine and Maine Foster Parents Association
- Pine Tree Legal Assistance
- Maine Bar Association
- Association of Community Intervention Programs

- Maine Association of Mental Health Services
- Relatives As Parents Program – School of Social Work, UMO
- Maine Association of Interdependent Neighborhoods
- Maine Equal Justice Partners
- Maine Department of Behavioral and Developmental Services
- Administrative Office of the Courts
- Child Welfare Advisory Committee
- Staff to the Youth Leadership Advisory Committee
- Court Appointed Special Advocates (CASA) program
- U.S. Inspector General’s Office
- U.S. Department of the Interior – Bureau of Indian Affairs

These activities have been beneficial in many ways, such as:

- Establishing referral relationships
- Facilitating outreach to potential client groups
- Identifying sources of technical assistance or information
- Improving the information available through our website
- Collaborating with UMO on a kinship care initiative
- Recruiting volunteers

Database Report:

Our database provides information about who called us, why they called and what happened as a result of their call. The following is a report produced by our database:

**Maine Children's Alliance
Child Welfare Services Ombudsman
Report to the Governor and Maine State Legislature**

Total Number of Calls:	103
Source of Referral:	
Friend	36
Relative	3
Service Provider	13
DHS	6
Attorney	7
Website	13
Unknown	25

Information Requested:

Child welfare services	59
Other state services	16
Parent (or child) rights	21
Complaint/grievance	57
Family support groups	31

Area of Complaint:**Child Protective Services: 33**

Substantiation	14
Family Support Plan	3
Safety Plan	3
Placement	3
Reunification	1
Policy or Process	3
Visitation	1
Other	5

Children's Services: 50

Family Support Plan	1
Placement	11
Kinship Care	13
Reunification	15
Policy or Process	1
Parent Involvement	1
Visitation	6
Other	2

Adoption: 2

Policy or Process	1
Parent Involvement	1

Foster Care: 1

Placement	1
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Other: 18

Substantiation	1
Placement	1
Kinship Care	1
Policy or Process	3
Other	12

Desired Action:

DHS action is not appropriate	13
Maintain the child in placement	2
Return to own parents	22
Make kinship placement	15
Substantiation of CA/N not appropriate	13
Licensing action is not appropriate	1
Additional services should be provided	23
DHS violated policy or procedure	7

Total Number of Cases Referred to DHS: 53

Cases in Review Process: 15

Cases in Which Action Was Taken: 29

DHS Review - resolved as requested	7
DHS Review - not resolved as requested	21
DHS Review - mediated - resolved	1
DHS Review – mediated – not resolved	0

Cases in Which No Action Was Taken: 9

Prior review completed	7
Not appropriate for internal review	2

Within opened cases, how many specific concerns were identified by complainants? 57

Within closed cases, what action was taken by the Ombudsman and what was the final disposition of those actions?

Reviewed complaint after DHS review: 22

Resolved	11
Not resolved	4
Partially resolved	7

Reviewed complaint with no DHS review:	9
Resolved	4
Not resolved	4
Partially resolved	1

For how many individual complaints were policy violations identified? 15

Identified Policy Areas:	
Kinship care	5
Foster care licensing	1
Permanency issue	2
Practice issue	7

Case Examples:

We have provided some individual case examples of the Ombudsman’s function and effectiveness, which also add to the understanding of the casework statistics we have provided.

Information and Referral

1. Mrs. S called to ask for help in getting post-adoptive support for her fourteen year old son, who was experiencing a mental health crisis. She had called the Children’s Crisis Hotline and was told she would have to give up custody of her child to the Department of Human Services in order to get the treatment her son needs. The Ombudsman:
 - Called the DHS District Office to clarify what Mrs. S might expect from post-adoptive services, and whom she should contact.
 - Gave Mrs. S information about the children’s mental health system and post-adoptive support through DHS.
 - Called the Department of Behavioral and Developmental Services regional office to suggest that the Department provide some guidance to its contractor regarding the unsuitability of state custody as a vehicle for getting services.

We did not open this inquiry as a case because with information Mrs. S could advocate for treatment for her son. The policy issue raised in this case was addressed with appropriate state officials and is noted in our annual report.

Complaint Investigation

2. Mrs. B called to complain that DHS had not investigated her complaint about sexual abuse of her daughter in her ex-husband's home. Through our intake process, we learned that the Department of Behavioral and Developmental Services (DBDS) was involved through Children's Crisis Services, Children's Mental Health Case Management Services and the local community mental health out-patient program. We also developed a history of this child's behavioral and mental health challenges. In the process we obtained information unknown to DHS. The Ombudsman:
 - Contacted the DHS District Office and reviewed the information we had gathered. DHS immediately opened an investigation because new information was presented to them.
 - Provided information to Mrs. B about the Children's Mental Health system and made suggestions about how she should involve her MH case manager in working with DHS.
 - Suggested to DHS that a case conference be held with DBDS providers to coordinate work on this case. Central Office staff from both departments were involved and a meeting did occur.
 - Continued to respond to requests for information about Mrs. B's ongoing child custody and visitation issues with her ex-husband.
3. Mrs. J called to complain that DHS would not consider her for kinship care of her niece. We asked DHS if they wanted to conduct an internal review of this complaint and they indicated they would. Their review supported the staff's decision not to place the niece with the aunt. The Ombudsman:
 - Conducted a review of the DHS record and met with DHS staff.
 - Supported the Department's decision to not place with the aunt because of the aunt's physical proximity to the child's perpetrator, and the child's need for more intensive treatment than the relative home could provide.
 - Recommended to the Department that it undertake work with the aunt, uncle and child to establish a relationship between the family members. The Department agreed and developed a plan.

- Inquired about the plan, or lack of plan, for ongoing visits between siblings as a result of reviewing DHS records and meeting with DHS staff. There were three children who were going for visits with their mother in the same location on the same day, but not seeing each other. DHS agreed that contact between the siblings was appropriate.

We suggested to Central Office DHS staff that they review their policy concerning sibling visits. We felt that this case illustrated the need for clarity in policy, training and/or supervision, since the Department believes that sibling relationships should be maintained unless clinical or safety concerns suggest otherwise.

4. Ms. D called to complain that DHS was not helping her reunify with her child. After obtaining a case history through the intake process, the Ombudsman:
 - Referred the case to DHS for internal review.
 - Reviewed the information provided by DHS, which indicated that a family services plan did exist, but that Ms. D was homeless and could not be reached to establish services.
 - Confirmed DHS information when we found that we could not locate Ms. D either.
 - Concluded that the DHS safety plan, which called for continuation of a relative placement, was appropriate.

Our final example illustrates the complexity of some of our cases.

5. A foster parent called to complain that a foster child had been removed from her home in retaliation for her allegation that the foster care agency had failed to provide adequate treatment, had allowed the child to go on a home visit where he was injured, and then failed to make a report to DHS about the alleged incident. The Ombudsman:
 - Asked if DHS wanted to conduct its own review. The Department did review this case and found its worker to have acted appropriately.
 - Conducted our own case review, and found that no referral had been made to any licensing body. We made a referral to Residential Child Care Licensing in DHS and Mental Health Licensing in DBDS. The two licensing bodies collaborated in the investigation.
 - Determined that the treatment team had appropriately considered all recommendations for treatment and simply disagreed with the foster parent. In relation to the home visit, we determined that the DHS caseworker had

inappropriately deferred to the treatment team within the therapeutic agency. We discussed caseworker responsibility for overseeing treatment within treatment agencies and for licensing violations within treatment agencies. Corrective action was taken by DHS.

- We determined that re-placement of the child with the foster parent was not in his best interest because he was doing so well in his new placement.

This case resulted in policy discussions with DHS management staff. In addition, the MH Licensing staff found the treatment agency in non-compliance with child abuse and neglect reporting requirements. It also found that the agency had inappropriately asked the foster parent to delete information from her report about what the agency knew about the alleged abuse. Lastly, despite some difficulties with this case, the caseworker was commended on their work with the biological family.

POLICY AND PRACTICE WITHIN THE DEPARTMENT OF HUMAN SERVICES

Throughout 2003, the Ombudsman office has identified policy and/or practice areas that require further development within the Department of Human Services. We have made recommendations in the areas of Child Protective Services, Children's Services, Service Providers, and Kinship Care. The following is a summary of the policy and practice issues identified:

Child Protective Services:

- Children need earlier and more thorough assessments when they come into State care to support better placements and assist providers in having a better understanding of the child's strengths and needs.
- The process of notification to tribes of child protective status, as required by the Indian Child Welfare Act, is critical and must be strengthened.
- Unannounced visits by DHS staff or Guardians ad litem to children in DHS care can re-traumatize children, and need to be kept to a minimum consistent with individual case decisions regarding actions necessary to assure safety.
- Evaluations of children and adults must be strength-based and supportive of State and federal mandates for keeping children in their own homes or safely returning them to their biological homes as soon as possible. The choice of providers qualified to do parental capacity evaluations consistent with State and federal intent should be expanded. We support the Department's work with the Court Evaluation Project as one way to assure availability of objective assessment resources.

- The Department has interpreted confidentiality requirements to mean that Department staff cannot tell care givers and/or providers what happened as a result of their child abuse and neglect report. We encourage a fresh look at the interpretation or a recommendation for statutory change to allow the Department to provide sufficient information to care givers or providers when it may effect care or treatment decisions.

Children’s Services:

- A clearer understanding of specific expectations is needed regarding Diligent Search criteria. Department staff must serve notice in hand to parties to child protective petitions. DHS must assure the court that they have conducted a “diligent search” for parties, such as parents, before the court will agree to notice by publication.
- More specific expectations are needed regarding Transition Plans for children age fourteen years or older. Transition plans are required by the Individuals with Disabilities Education Act for all children with disabilities over age fourteen. A clarification of the roles of caseworkers and surrogate parents is needed to assure that transition plans are completed as required by federal and state law. It may be appropriate to increase caseworker involvement in educational decisions at Pupil Evaluation Team (PET) meetings.
- Caseworkers must get regular written reports from outside service providers, including therapists, in order to monitor the progress of children in treatment and assure accountability.
- Training and supervision should support a caseworker’s understanding of mental health treatment options and placements in order to empower caseworkers in the decision making process for their clients.
- DHS staff must be trained on the information found in the Rights of Recipients of Mental Health Services Who Are Children in Need of Treatment, and policy must clearly state the caseworker’s responsibility for assuring that those rights are safeguarded.

Service Providers:

- DHS must work with providers to clarify expectations for communication, especially when disagreements between DHS and providers may undermine DHS relationships with families or foster parents.
- DHS and the Department of Behavioral and Developmental Services need to clarify with providers why recommendations continue to be made for parents to give up custody to DHS in order to get treatment. It is not sufficient to simply tell providers not to give such direction to their clients.

Foster Care:

- Caseworkers understand that they cannot talk with foster parents about issues that may have led to an Institutional Abuse referral during an Institutional Abuse investigation (which can take 6-12 months). In some instances, management of care requires such discussions. Clarification for staff as to when discussions may occur is necessary.
- Foster care licensing should cross-reference foster care applicants with Child Protective Services reports.
- Development of foster home placements appears inadequate to assure prompt placement within reasonable distance of birth parents and keeping siblings together when it is appropriate.

Kinship Care:

- Kinship care placements are considered less frequently when specific support needs are present. Policy should clarify that children can expect to receive the level of support necessary to support a kinship placement if it is available and safe.
- DHS should consider the possibility of developing two sets of foster home regulations; one for licensed kinship homes and one for regular foster care homes. The licensing of kinship homes should support the goal of more kinship placements while providing the same level of financial and other supports that regular foster care homes receive.
- We are supportive of the Department of Human Services request for a Title IV-E waiver to develop a subsidized guardianship program.

RECOMMENDATIONS FOR CHANGES IN THE OMBUDSMAN STATUTE

During the course of the first year of operation, the Ombudsman has identified some changes in State statute that, if made, would enhance the functioning of the program:

- Clarify that Department records and staff include agencies with whom the Department contracts for services to clients of the child welfare program
- Establish Ombudsman as “staff” for the purposes of access to the Department’s database (MACWIS)

- Establish requirement for cooperation with the Ombudsman by Guardians ad litem for the purpose of carrying out Ombudsman duties as established by State statute

In addition, we are recommending that funding for the Ombudsman program be expanded. We believe that federal matching funds are available.

SUMMARY OF OMBUDSMAN WEBSITE

The Ombudsman website (www.mekids.org) has evolved a tremendous amount over the first year. We began the year by creating a plan for the website. We contracted with a web page designer (Holly Valero), who created the template and trained staff to manage the website. The following is a list of current website features:

- Guiding Principles
- When to seek help from the Ombudsman
- Frequently Asked Questions
- Resources
- Submit a Complaint Form
- Bulletin Board

In the upcoming months, the Ombudsman office plans to make several other additions to the website. These include:

- Meet the Staff and Volunteers
- Case Examples
- Addition of New Resources
- Our Annual Report
- Refinement of the Online Intake Form

APPENDICES

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APPENDIX A

**A COMPARISON OF STATE
OMBUDSMAN PROGRAMS AND
IDENTIFICATION OF PROMISING
PRACTICES**

A COMAPRISON OF STATE OMBUDSMAN PROGRAMS AND IDENTIFICATION OF PROMISING PRACTICES

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MAINE CHILD WELFARE SERVICES OMBUDSMAN

Mission of the Maine Children's Alliance:

The Maine Children's Alliance advocates for sound public policies to improve the lives of Maine's children, youth and families.

Guiding Principles of the Ombudsman Program:

1. Professionals, like all people, want to do good work. No one ever sets out to do the wrong thing. In short, we assume that the intentions of our colleagues are good.
2. Parents strive to be good parents. They do not set out to do bad things or to allow bad things to happen to their children.
3. The best interest of children is a healthy family in a strong community.
4. Family members should support and care for each other. We look to family members first when children are in jeopardy.
5. Treatment intervention must begin with positive regard for the parents and their interest in being good parents.
6. Parents and family members must be regarded as partners in the process of protecting and treating children.
7. Children have a right to be safe and in a stable home. Our interest in supporting parents should not interfere with that right.
8. Problem resolution begins at the lowest level possible.
9. Procedural violations that do not adversely affect the interest of children are not our responsibility.
10. Empowerment of parents and families to resolve their own problems is an important objective of our work.
11. We are fair and impartial as expressed through our procedures.
12. We do not become involved in personnel issues.

PREFACE

In January of 2003, the Maine Children's Alliance (MCA) began operating a Child Welfare Services Ombudsman program to address concerns regarding child welfare services provided by the Maine Department of Human Services (DHS). The Ombudsman works as an independent agent within the State's Executive Department. The Ombudsman is responsible for providing information and referrals as well as receiving and investigating complaints and concerns from individuals who are concerned about the best interest of children. Through a cooperative relationship with DHS, the Ombudsman works to resolve individual issues. The Ombudsman also identifies policy issues during the resolution of complaints, and makes recommendations directly to DHS, the Governor's Office and the Legislature in an effort to promote systemic improvements.

As the Child Welfare Services Ombudsman began formalizing much of the policies and procedures that guide its operations, research into ombudsman offices around the country provided a unique perspective on the many models that serve to protect children's best interests. This document serves to bring together the information from this research effort, and highlights Maine's vision in its creation of an office that works cooperatively with DHS. The purpose of this report is to serve as a tool for increasing policymakers' awareness of the full scope of services offered through ombudsman offices by examining practices from a cross-section of states. A synopsis of these findings, a comparison chart, an alphabetical listing of individual descriptions of state applications, and a summary of practices are offered for examination, as well as recommendations for policies and procedures. The final section includes implemented and proposed practices of the Maine Child Welfare Services Ombudsman.

SUMMARY OF FINDINGS

Scope

An ombudsman is generally someone that is formally appointed to hear and investigate complaints relative to the actions and operations of governmental officials and agencies. Within the child welfare system, the ombudsman's purpose is to address complaints related to government services for children, and to protect the best interests of children and the legal rights of their families who are in some way involved with state or county child services agencies. Legislation varies from state to state with regard to the scope of powers granted to ombudsman offices. Six of the eight states surveyed focus services only on children's issues, while two provide services for both children and adults.

Maine established its Ombudsman program to provide ombudsman services to children and families in need of child welfare services provided by the Department of Human Services.

Year Established

The average length of time that the surveyed programs have been in operation is approximately 12 years. Alaska and Florida (1975) and Washington (1976) are the oldest programs. The newer programs, Georgia and Maine, were established less than three years ago.

Maine's initial Child Welfare Services Ombudsman program was terminated in 1992 due to budgetary concerns, but legislative recognition of the need for focus on the child welfare system helped to revive the program in 2003.

Annual Budget

The average budget allocated for ombudsman programs surveyed totals approximately \$530,500. The state of Michigan has the largest annual budget of \$1,161,000 and Maine has the smallest with \$120,000. The other six states are each allocated approximately \$500,000.

Areas of Child Welfare Covered

Most of the agencies provide monitoring and oversight regarding out-of-home placements, such as foster homes, child placement facilities and juvenile correction facilities, agency activities, such as review of institutional abuse complaints and investigation of child fatalities, and systemic issues, such as educating the public and system-wide advocacy. Some of these agencies have broad mandates, such as focusing on all people with disabilities or on governmental institutions, while others have extremely broad duties and authority to act. Of the eight children's ombudsman programs reviewed, three cover all state agencies, one covers all state agencies and

those private agencies receiving public funding, another covers all state and public agencies providing services for children, and two cover all public child protective services, including foster care and adoption.

Maine's mandate is to focus on child welfare services provided by the Department of Human Services in order to assist in the resolution of concerns in individual cases, as well as make policy change recommendations to the Governor, Legislature and Department of Human Services.

Level of Autonomy

Most of the states recognize that the role of the Ombudsman office is to provide public accountability and independent monitoring of state departments entrusted with the care of children. The states surveyed include both ombudsman offices that operate as state agents and as independent contract agencies. The numbers are split evenly with four programs that are independent agencies and four that are state agents. Regardless of their level of autonomy, all of the programs operate either under the Legislature or the Governor's office.

Maine's Child Welfare Services Ombudsman is an independent agent operating by contract with the Executive Department.

Volume

The average number of calls received through the eight Ombudsman offices is 3,514 and of those calls, approximately 515 are investigated each year. It should be noted that the numbers for this section are greatly skewed by Florida's program, which covers every county within that state, receives 19,000 calls, and investigates 1,700 cases per year.

Since its inception in 2003, Maine's Ombudsman has received 103 calls and investigated 53 cases.

Number of Employees

The average number of employees per Ombudsman program across the eight states is approximately eight. Michigan with 13 and Georgia with 11 have the greatest number of paid employees, while Florida with 3 and Maine with 1.9 have the least.

Volunteers

Alaska, Connecticut, Florida and Maine all use volunteers to provide multidisciplinary assistance in processing complaints to the Ombudsman, while Georgia, Michigan, Utah and Washington do not.

Maine utilizes trained, professional volunteers who have years of experience in the field of child welfare, and who possess various levels of education, such as pediatricians, attorneys, clinicians and case managers.

Ability to Take Legal Action

Five of the eight states surveyed are able to take legal action, such as the ability to subpoena written records, hard drives and witnesses, initiate or intervene in court cases on behalf of children, and the ability to file for Termination of Parental Rights. Only three states, Georgia, Michigan and Maine, do not have the ability to take any legal action.

Maine's program will assist referents in obtaining information and referrals to appropriate agencies if they are in need of legal assistance with regard to children's issues.

STATE COMPARISON OF OMBUDSMAN PROGRAMS

	Maine	Alaska	Connecticut	Florida	Georgia	Michigan	Utah	Washington
Scope	Children	Children and Adults	Children	Children and Adults	Children	Children	Children	Children
Year Established	2003	1975	1995	1975	2000	1994	1996	1976
Annual Budget	\$120,000	\$500,000	\$438,502	\$332,000	\$792,000	\$1,160,800	\$400,000	\$500,000
Areas of Child Welfare Covered	Public Child Protective Services, Foster Care, and Adoption	All state agencies	All state agencies	All state agencies	All state agencies	Public and Private Child Protective Services, Foster Care, and Adoption	Public Child Protective Services, Foster Care, and Adoption	All state agencies
Level of Autonomy	Independent Agent	State Agent	Independent Agent	State Agent	State Agent	State Agent	Independent Agent	Independent Agent
Volume	103 calls/year 53 complaints investigated	1200-1300 calls/year 600 complaints investigated	1400 calls/year 565 complaints investigated	19,000 calls/year 1,700 complaints investigated	Not avail. calls/year 547 complaints investigated	821 calls/year 145 complaints investigated	578 calls/year 112 complaints investigated	1,462 calls/year 438 complaints investigated
Number of Employees	1.9	7	5	3	11	13	7	6
Volunteers	Yes	Yes	Yes	Yes	No	No	No	No

STATE PROFILE: MAINE

Scope	Children
Year Established	2003
Annual Budget	\$120,000
Areas of Child Welfare Covered	Public child protective services, foster care and adoption
Level of Autonomy	Independent agent
Volume	103 calls/year; 53 complaints investigated
Number of Employees	3 (Ombudsman 40%, Assist. Ombudsman 100%, Assist. Ombudsman 50%)
Volunteers	Yes, trained, stipend included
Ability to Take Legal Action	No
Mission Statement	The Maine Children's Alliance advocates for sound public policies to improve the lives of Maine's children, youth and families.
Written Policy and Procedures	Yes
Familiarity with Federal Laws (AFSA, HIPAA, ICWA)	Yes, staff training available
Program Highlights	<ul style="list-style-type: none"> • Investigates complaints based on an assigned priority level (standard or emergent) • Works collaboratively with DHS to resolve individual complaints • Utilizes multidisciplinary, skilled and trained volunteers • Works within established timeframe for inquiry, referral and investigation processes • Makes recommendations for systemic changes
Contact Information	Maine Children's Alliance Children's Ombudsman 303 State Street Augusta, ME 04330-7037 (207) 623-1868; 1-866-621-0758 http://www.mekids.org/am/publish/Ombudsman.shtml

STATE PROFILE: ALASKA

Scope	Children and Adults
Year Established	1975
Annual Budget	\$500,000
Areas of Child Welfare Covered	All state agencies
Level of Autonomy	State agent operating under the Legislature
Volume	1200-1300 calls/year; 600 complaints investigated
Number of Employees	7 including the Ombudsman, 4 Assistant Ombudsman, an Intake Worker and an Administrative Assistant
Volunteers	Yes, trained, no stipend
Ability to Take Legal Action	Yes, has the power to subpoena records and hard drives, and publish investigative findings
Mission Statement	Not available at this time
Written Policy and Procedures	Yes
Familiarity with Federal Laws (AFSA, HIPAA, ICWA)	Yes, staff training available
Program Highlights	<ul style="list-style-type: none"> • Sends Frequently Asked Questions (FAQ) sheet to referents • Developed 16 types of inappropriate actions by state agencies • Publishes public reports of full investigations • Receives complaints via email or US mail • Requires prior resolution attempts before accepting a complaint
Contact Information	Office of the Ombudsman PO Box 102636 Anchorage, AL 99510-2636 (907) 269-5290 http://www.state.ak.us/local/akpages/LEGISLATURE/ombud/home.htm

STATE PROFILE: CONNECTICUT

Scope	Children
Year Established	1995
Annual Budget	\$438,502
Areas of Child Welfare Covered	All state agencies and those receiving public funding
Level of Autonomy	Independent agent
Volume	1400 calls/year; 565 complaints investigated
Number of Employees	5 including the Child Advocate, the Associate Child Advocate, two Assistant Child Advocates and an Administrative Assistant
Volunteers	Yes
Ability to Take Legal Action	Yes, can subpoena witnesses and documents, communicate privately with a child, and initiate or intervene in court cases
Mission Statement	To oversee the protection and care of children and to advocate for their well-being.
Written Policy and Procedures	Yes
Familiarity with Federal Laws (AFSA, HIPAA, ICWA)	Yes
Program Highlights	<ul style="list-style-type: none"> • Guided by a multidisciplinary advisory committee • Conducts programs of public education • Promotes systemic reform through legislative advocacy • Provides training and technical assistance to children's attorneys
Contact Information	Office of the Child Advocate 18-20 Trinity Street Hartford, CT 06106 (860) 566-2106; 1-800-994-0939 http://www.oca.state.ct.us

STATE PROFILE: FLORIDA

Scope	Children and Adults
Year Established	1975
Annual Budget	\$332,000
Areas of Child Welfare Covered	All state agencies
Level of Autonomy	State agent operating under the Office of the Governor
Volume	19,000 calls/year; 1,700 complaints investigated
Number of Employees	3 including the Executive Director, Assistant Director and a Secretary
Volunteers	Yes, entitled to be reimbursed for per diem and travel expenses
Ability to Take Legal Action	Yes, allowed access to all client records, files, and reports from any state funded or contracted program, service, or facility. The council can petition the court for access to client records that are confidential.
Mission Statement	Protecting and advocating for a better quality of life for Floridians with unique needs.
Written Policy and Procedures	Yes
Familiarity with Federal Laws (AFSA, HIPAA, ICWA)	Yes
Program Highlights	<ul style="list-style-type: none"> • Organized use of volunteers • Organized structure of Local Advocacy Councils (LAC) to conduct investigations • Oversight of LAC's by Statewide Advocacy Council (SAC) • Monitor and review state agency programs and facilities as well as clients' participation in research studies • Utilization of volunteer expertise in investigations • Appointment of volunteers by the Governor for a specified term
Contact Information	Florida Statewide Advocacy Council 1317 Winewood Blvd., Bldg. 1, Rm 401 Tallahassee, FL 32399-0700 (850) 488-5312; 1-800-488-6173 http://www.floridasac.org

STATE PROFILE: GEORGIA

Scope	Children
Year Established	2000
Annual Budget	\$792,000
Areas of Child Welfare Covered	All state agencies
Level of Autonomy	State agent operating under the Office of the Governor
Volume	N/A calls/year; 547 complaints investigated
Number of Employees	11 including the Child Advocate, the Assistant Child Advocate, an Administrative Assistant, the Director of Policy and Administration, the Chief Investigator, 5 Investigators, an Intake Technician and the Victim Advocate
Volunteers	No
Ability to Take Legal Action	Yes, they have the ability to subpoena information
Mission Statement	To promote the enhancement of the State's existing protective services system to ensure that children are secure and free from abuse and neglect.
Written Policy and Procedures	Not available at this time
Familiarity with Federal Laws (AFSA, HIPAA, ICWA)	Yes, training available
Program Highlights	<ul style="list-style-type: none"> • Ability to review facilities and procedures of any institution or residence where a child has been placed • Engages in programs of public education and advocacy • Guided by a multidisciplinary advisory committee • Inform people of volunteer opportunities
Contact Information	Office of Child Advocate 3330 Northside Drive, Suite 100 Macon, GA 31210 (478) 757-2661; 1-800-254-2064 http://www.gachildadvocate.org

STATE PROFILE: MICHIGAN

Scope	Children
Year Established	1994
Annual Budget	\$1,160,800
Areas of Child Welfare Covered	Public and private child protective services, foster care and adoption
Level of Autonomy	State agent
Volume	821 calls/year; 145 complaints investigated
Number of Employees	13 including two Administrative Support Staff, and a multidisciplinary team of 10 Investigators
Volunteers	No
Ability to Take Legal Action	Yes, may take legal action and file for Termination of Parental Rights
Mission Statement	The mission of the Office of the Children's Ombudsman is to assure the safety and well-being of Michigan's children in need of foster care, adoption, and protective services and to promote public confidence in the child welfare system.
Written Policy and Procedures	Yes
Familiarity with Federal Laws (AFSA, HIPAA, ICWA)	Yes
Program Highlights	<ul style="list-style-type: none"> • Tracks the characteristics and progress of each case, examines trends and patterns, and compiles results of investigations using database • Serves on many boards and committees • Hosts the bimonthly meetings of the Michigan chapter of the American Professional Society on the Abuse of Children • Invites individuals and groups to share information • Engages in programs of public education and advocacy
Contact Information	Office of Children's Ombudsman PO Box 30026 Lansing, MI 48909 (517) 373-3077; 1-800-642-4326 http://www.michigan.gov/oco

STATE PROFILE: UTAH

Scope	Children
Year Established	1996
Annual Budget	\$400,000
Areas of Child Welfare Covered	Public child protective services, foster care and adoption
Level of Autonomy	Independent agent located within the Department of Child and Family Services (DCFS)
Volume	578 calls/year; 112 complaints investigated
Number of Employees	7, including the Ombudsman, two Assistant Ombudsman, an Executive Secretary and an Intake Specialist
Volunteers	No
Ability to Take Legal Action	No
Mission Statement	To investigate consumer complaints regarding the DCFS, and assist in: <ol style="list-style-type: none"> 1. Achieving fair resolution 2. Promoting changes that will improve the quality of services provided to the children and families of Utah 3. Build bridges with partners to effectively work for the children of Utah
Written Policy and Procedures	Yes
Familiarity with Federal Laws (AFSA, HIPAA, and ICWA)	Yes
Program Highlights	<ul style="list-style-type: none"> • Spends up to six months occasionally working on an individual case, referred to as an expanded case
Contact Information	Office of Child Protection Ombudsman 120 North 200 West, Room 422 PO Box 45500 Salt Lake City, UT 84145-0500 (801) 538-4589; 1-800-868-6413 http://www.hsocpo.state.ut.us/default.htm

STATE PROFILE: WASHINGTON

Scope	Children
Year Established	1976
Annual Budget	\$500,000
Areas of Child Welfare Covered	All state agencies
Level of Autonomy	Independent agent operating under the Office of the Governor
Volume	1462 calls/year; 438 complaints investigated
Number of Employees	6 including the Director, 2 Ombudsman, a Senior Office Administrator and an Information and Referral Specialist
Volunteers	No, under consideration
Ability to Take Legal Action	No
Mission Statement	To protect children and parents from harmful agency action or inaction, and to ensure that agency officials and state policy makers are aware of chronic and serious problems in the child protection and child welfare system so they can improve services.
Written Policy and Procedures	Yes
Familiarity with Federal Laws (AFSA, HIPAA, ICWA)	Yes
Program Highlights	<ul style="list-style-type: none"> • Accesses statewide computer system • Investigates every complaint (based on assigned priority level; standard or emergent) • Prints forms in five languages • Investigates cases within 15 days • Publishes investigative findings and makes system-improvement recommendations in public reports to the Governor and the Legislature • Utilizes multidisciplinary advisory committee
Contact Information	Office of the Family and Children's Ombudsman 6720 Fort Dent Way, Suite 240 Mail Stop TT-99 Tukwila, WA 98188 (206) 439-3870; 1-800-571-7321 http://www.governor.wa.gov/ofco

PROGRAM HIGHLIGHTS

A Cross Section of Practices across the Eight States:

Complaints

- Child welfare agencies are included early on in the complaint process.
- Complaints are received exclusively via email or US mail.
- Frequently Asked Questions (FAQ) sheet is sent to all referents.
- Complaint and FAQ forms are available in five languages.
- 16 types of inappropriate actions by state agencies have been developed to help determine whether a complaint against an agency is justified.
- Investigate every complaint based on an assigned priority level: standard or emergent.
- The Ombudsman requires that a person attempt to work out a solution with the appropriate agency or agencies before filing a complaint.
- The Ombudsman hears and processes initial complaints.

Investigations

- Public reports of full investigations are available at the Ombudsman website.
- Investigative findings and systemic improvement recommendations are published in public reports to the Governor and Legislature.
- Ability to review the facilities and procedures of any institution or residence where a child has been placed.
- Review of state agency programs and facilities, as well as clients' participation in research studies.
- Full access to the statewide automated child welfare information system.
- Cases are investigated within 15 days.
- May spend up to six months working on an individual case.

Responsibilities

- Conducts programs of public education.
- Promotes systemic reform through legislative advocacy.
- Provides training and technical assistance to children's attorneys.
- Engages in programs of public education and advocacy.

Community Participation

- Skilled and trained volunteers utilized in a consistent and organized manner.
- Individuals and groups are requested or invited to share information with the Ombudsman.
- Guided by a multidisciplinary advisory committee, which meets three times per year and on an as-needed basis.
- Ombudsman offices are found in each county of the state and consist of approximately 15 volunteer members appointed by the Governor for four-year terms.
- The overseeing body for the Ombudsman includes 15 volunteers of diverse backgrounds and includes a consumer.

- The Ombudsman and several staff investigators serve on many boards and committees.
- The Ombudsman hosts the bimonthly meetings of the American Professional Society on the Abuse of Children.

Electronic Information

- Database allows tracking of the characteristics and progress of each case, examining trends and patterns, and compiling results of investigations.
- Website contains information on how to develop a complaint system.
- Website directs people to volunteer opportunities.

PROGRAM RECOMMENDATIONS

A Cross Section of Promising Practices across the Eight States:

Advocacy

- Ability for the Ombudsman's office to actively advocate for changes at the state level in policies and laws as they relate to problematic system issues.
- Provide summaries of problematic policy and system areas to the Legislature.
- Post policy findings publicly in a manner that is consistent with protecting confidentiality according to federal and state laws and program policies.

Administrative

- Create a strategic plan that is reflective of the mission statement and federal and state mandates.
- Train all employees and volunteers on mandated federal child welfare laws.
- Improve database capabilities so that incoming calls/complaints can be categorized by referral source, type of call, age of child, county, etc.
- Open access to state automated child welfare information system.
- Utilize consumers in the decision-making process for Ombudsman services such as at board level or advisory council.
- Utilize multidisciplinary teams for consultation on cases.

Complaint Process

- Provide all forms in different languages.
- Provide a complaint form online with the option of calling for assistance with completion of form.
- Conduct consumer satisfaction surveys.
- Utilize local, in-county volunteers or staff members to investigate and respond to consumer complaints.
- Minimize turnaround (from complaint to resolution) time by setting a goal for appropriate turnaround time and consistently tracking that information.
- Maintain separate Ombudsman offices with regard to children and adults.
- Build a community presence through education of the public as well as administrators and legislators.

Community Education

- Team education such as pairing up with an in-house county DHS staff member to make presentations about the Ombudsman program.

Electronic Resources

- Web link to legislation that created the office of the Ombudsman.
- Establish a web link to the Ombudsman's office from the State web page.
- Provide the mission statement, policies, procedures (procedural flow-chart) and organization chart for viewing via website.
- Provide web links to helpful resources.

MAINE PROGRAM HIGHLIGHTS

Implemented Practice

- Use of trained professional volunteers experienced in child welfare issues to investigate and respond to consumer complaints.
- Training for all employees and volunteers on mandated federal child welfare laws.
- Established goal and tracking capabilities for appropriate turnaround time on complaints.
- Written mission statement, policies and procedures exist, and are available for public viewing.
- Availability of online complaint form with option of calling for assistance with completion.
- Access to the files, records and personnel of the Department.
- Make recommendations at the State level regarding policies and laws as they relate to problematic system issues.
- Community presence through education of the public as well as administrators, agencies and legislators.
- Public posting of policy findings in a manner that is consistent with federal and State laws and MCA's mission to protect confidentiality.
- Improved database capabilities for tracking information and identifying trends.
- Work collaboratively with the Department early on in the complaint process.
- Investigate complaints based on an assigned priority level: standard or emergent.
- Require individuals to attempt to work out a solution with the appropriate agency or agencies before filing a complaint.
- Issue an annual report to the Governor and Legislature.
- Encourage individuals and groups to share information.
- Provide information on volunteering with the Ombudsman program.

Planned Practice

- Make the organizational chart and procedural flow-chart available on-line.
- Create a strategic plan that is reflective of the mission statement and federal and state mandates.
- Provide all forms released to the public available in various languages.
- Implement consumer satisfaction surveys.
- Send Frequently Asked Question (FAQ) sheet to all referents.

Website Features

- Guiding Principles
- When to seek help from the Ombudsman
- Frequently Asked Questions
- Resources
- Submit a Complaint Form
- Bulletin Board

Future Website Additions

- Meet the Staff and Volunteers
- Case Examples
- Addition of New Resources
- Annual Report
- Online Intake Form

Trained Professional Volunteers

- (2) Licensed Social Workers
- (3) Licensed Clinical Social Workers
- Pediatrician
- (2) Lawyers
- Masters of Education
- (2) Bachelors of Arts

Volunteers are trained in the following areas:

- Introduction to Child Welfare Practice
- Philosophy of the Ombudsman
- Confidentiality
- Ombudsman Procedure
- Ombudsman Timeline (including case example)
- Maine Child Protective Judicial Process
- Overview of Ombudsman Website
- Billing Procedure for Ombudsman Stipend

Complaint Resolution

- Gather facts from both sides
- Work in the best interest of the child
- Mediate solution between parties

Located in the Governor's Office

- Independent program within the Executive Department
- Executive Department contracted with the Maine Children's Alliance, a nonprofit advocacy organization
- The Ombudsman program is responsible to the Governor

STATE POLICY AND PROCEDURES

MAINE

1. Listen to complainant, make appropriate referrals, and explain ombudsman process to caller.
2. Fill out intake and Department of Human Services (DHS) referral forms.
3. Complete "Summary of Complainant Statement" summarizing information received from complainant.
4. Review information with the Ombudsman.
5. Make case referral to DHS Program Administrator in covering district office.
6. Send complainant a letter summarizing ombudsman process, and enclose a copy of the complaint statement asking for their review.
7. If DHS elects to review internally, no action will be taken until that review is completed (exceptions approved by the Ombudsman).
8. If DHS elects not to review, or completes the review and the Ombudsman finds it unacceptable, the Ombudsman will contact the Program Administrator and schedule a date and time to review case records and meet with appropriate DHS staff.
9. Concurrently contact other listed parties and request records and interviews either face to face or by phone.
10. Determine recommendation.
11. Communicate action plan to DHS, who will be contacted, with recommendations.

ALASKA

1. In most cases, the Ombudsman requires that a person attempt to work out a solution with the agency before filing a complaint.
2. If the person remains dissatisfied after contacting supervisors and using the agency appeal process, the person is referred to other agencies for help.
3. If the Ombudsman is the most appropriate venue, the person fills out a complaint form via email or US mail.
4. The Ombudsman will determine whether the complaint is jurisdictional, that is, whether the office has authority under its statutes and regulations to review the issue.
5. If deemed jurisdictional, an investigator will review the complaint and determine how to proceed. The case is reviewed, discussed with state officials and witnesses (when necessary), and researched regarding state law and regulations.
6. The investigator reports back to the complainant either formally or informally.
7. Because of a lack of resources, not all complaints are investigated.
8. If the Ombudsman investigation finds that an agency has made a mistake or could be doing a better job, the Ombudsman may recommend corrective action.
9. Agencies do not have to follow the Ombudsman's recommendations.

10. In most cases, the Ombudsman works quietly with the citizen and the agency. However, public reports of full investigations are available at the Ombudsman website.

CONNECTICUT

1. Respond to questions, requests and complaints.
2. Determine routing.
3. Make referrals to appropriate services.
4. Determine if investigation is warranted.
5. Contact relevant agency and request necessary information.
6. If complaint involves the Department of Children & Families, review their database (known as LINK).
7. Contact the attorney or Guardian ad litem if one exists.
8. Offer technical assistance in mediation of complaint.
9. Analyze records.
10. Determine if issue raised requires action or intervention.
11. Determine whether the complainant's concerns have been addressed and resolved because the issue has been highlighted for the involved agency.
12. Determine if additional issues have come to light during the course of the investigation that were not raised by the complainant but require action or intervention.
13. If intervention is necessary and appropriate, identify specific action to be taken.

FLORIDA

Written policy and procedures were not available.

GEORGIA

Written policy and procedures were not available.

MICHIGAN

1. A complaint is received via phone, mail, email, or fax and is directed to an intake investigator who takes demographic information and enters the information into an automated database.
2. If the complaint falls outside the jurisdiction, the intake investigator will refer the complainant to other agencies or individuals who may be able to resolve the problem.
3. All complaints are brought to the attention of the Ombudsman and a decision is made regarding what course of action will be taken.
4. Complaints fall into three categories: inquiries, referrals and valid complaints.
5. When a complaint is deemed valid, a letter is sent informing the complainant that the case will be investigated.

6. Questions for the investigator to consider are established by the Ombudsman and the intake investigator and are entered into the database.
7. A request for the file is made through the Family Independence Agency's (FIA) Office of the Family Advocate indicating the type of case (CPS, foster care or adoption) and the nature of the complaint.
8. Upon receipt of the file, the case is assigned to a lead investigator.
9. Case investigations are time-intensive and involve a thorough review. Investigations include documentation, interviews with agency personnel and other interested parties, court appearances, case conferences and third-party consultations.
10. Throughout the process, team members consult with one another, with the Ombudsman, and the supervising investigator.
11. At the conclusion of an investigation, the Office of the Child Ombudsman (OCO) either affirms or disaffirms the actions of the agency in question.
12. If the OCO concludes that FIA and/or the private agency complied with law or policy, a letter is sent to the complainant that outlines the steps taken, and affirms the actions of the agency. A copy of this letter is sent to FIA and/or the private agency.
13. If the OCO concludes that FIA and/or the private agency did not comply with law or policy then the OCO issues a report to FIA and/or the private agency.
14. Agencies are provided 60 days to review and respond.
15. The complainant receives a closing letter that includes OCO's recommendations, the agency response, and any actions taken by the agency to correct the problem(s). A copy of the letter is also sent to FIA and/or the private agency.

UTAH

1. When a complaint is received, it is logged into a database and the Department of Children and Family Services (DCFS) is notified.
2. When possible, the Ombudsman's office works with DCFS to resolve the complaint through an internal review process.
3. If an investigation is necessary, the investigator will review the case record, conduct interviews with appropriate persons, and collect other necessary data.
4. Based on the information collected, the investigator will determine if the concerns are valid.
5. The investigator may note and report areas where practice can be improved.
6. The information is then reviewed with the complainant and DCFS for accuracy and clarity.
7. A recommendation to DCFS will then follow.
8. Utah's Ombudsman program has the right to file an appeal on a case with the executive director of DCFS.

WASHINGTON

1. Investigations begin when a completed complaint form is received.
2. Complaint information is entered into an automated database.
3. The Director Ombudsman reviews the complaint to determine whether it meets criteria for an emergent or standard investigation.
4. If a complaint warrants an emergent investigation, the case is assigned and immediately investigated.
5. If a complaint warrants a standard investigation, the case will be assigned and will be investigated within 15 working days of the office's receipt of the complaint.
6. In investigations, the lead Ombudsman contacts the complainant and reviews information on the computerized case-management system (CAMIS), including the caseworker's narratives, Child Protective Services referral history, legal history and other relevant information.
7. The Ombudsman also interviews caseworkers, supervisors, and other individuals involved with the case, such as Guardians ad litem. If appropriate, the Ombudsman may conduct a complete review of the hard file or request faxed copies of pertinent documents, such as community Child Protection Team reports or independent professional evaluations. In some instances, to obtain a more complete perspective of the case, the Ombudsman will attend and observe, but not participate in, key meetings and court hearings.
8. After gathering sufficient factual information and researching applicable laws, policies and procedures, the Ombudsman writes a report describing the complaint issues and case background. This investigative report also contains analyses and findings on key issues pertaining to the alleged conduct of DSHS or another agency.
9. The report is provided to the Director Ombudsman and the other ombudsmen for a team review.
10. In emergent investigations, the lead Ombudsman expedites the standard investigation process and must report his or her preliminary or final findings to the Director within 48 hours after receiving the complaint.

APPENDIX B

Annual Report for FY 03

The Maine Long-term Care Ombudsman Program
July 1, 2002 – June 30, 2003

As part of this Annual Report, the following frames have specific information about the work done for consumers during the 2nd six-month reporting period, January 1 through June 30, 2003.

I. Annual Contract Goals

In FY 03, the Ombudsman Program met its contract goals. The hard work of skilled, well-trained ombudsman staff, a dedicated volunteer corps, and a committed board of directors made this possible. This report details the following achievements.

1. Facility Visits. **Goal achieved. 100% of the long term care facilities with seven or more beds were visited.** During FY 03, the generous assistance of Volunteer Ombudsmen and LTCOP staff made it possible for the program to complete 274 monitoring visits in long-term care facilities. Monitoring visits follow a specific protocol and are made in addition to the many complaint investigation visits made to residents by LTCOP. As a result, LTCOP met its annual contract goal by visiting 100% of the nursing homes and assisted housing facilities with seven or more beds. Additional monitoring visits were made when facilities had an inspection survey that indicated significant problems with resident care, and when we received complaints indicating a risk to the health and safety of residents. Ombudsman volunteer and staff presence in facilities is a critical link for consumers in accessing Ombudsman services.
2. In-services trainings on Resident Rights. **Goal achieved. LTCOP provided Resident Rights In-services for long-term care facilities cited for resident rights violations.** Staff coordination efforts resulted in Volunteer Ombudsmen giving **84** Resident Rights In-services to facility staff.

3. Community Outreach. **Goal achieved.** LTCOP distributed program posters/brochures to local town offices, churches, and physicians' offices. **LTCOP mailed packets of information about LTCOP to 65 town/municipal offices for distribution to local citizens who may need LTCOP services. **LTCOP also mailed an extensive packet of LTCOP information to the Maine Council of Churches to educate members of their congregation who have long-term care needs about LTCOP's free, confidential services. **LTCOP wrote an article that was published in the Maine Medical Association's Newsletter to remind members of the medical community that LTCOP is an available resource for long-term care consumers. **The Public Service Announcement [PSA] about LTCOP is close to completion. WAGM-TV in Aroostook County is assisting us in developing a PSA for outreach to consumers in northern Maine.

4. Collaboration with Licensing. **Goal achieved.** LTCOP meets quarterly with staff at the Division of Licensing and Certification to review the delivery of consumer care in nursing facilities. During FY 03, LTCOP developed an improved model for communication and collaboration with the Division of Licensing and Certification on complaint investigations and annual nursing facility surveys. LTCOP also meets quarterly with the Assisted Living Licensing Unit to discuss consumer issues with assisted housing and residential care.

II. Complaint Investigation

During the 2nd six-month period, January through June 2003,

- ✓ **744** complaints were investigated.
- ✓ **558** complaints were closed, including 425 *verified* complaints, resulting in 370 *successfully resolved* complaints.

5. Complaint Investigation – An Overview

During FY 03, a total of **1,665** complaints were investigated in all long-term care settings. One thousand three hundred eighty-eight [**1,388**] complaints were closed, including **1,002** verified complaints, resulting in **912** successfully resolved complaints [91%]. *See Attachment "A"*. Most often complainants come to us with concerns about *resident care*, including slow staff response to call bells, problems with plans of care, medication issues, and ADL/IADL issues. Categories with some of the highest numbers of complaints during FY 03 include resident care, abuse, resident rights, and dietary/food issues. A variety of staffing issues continues to be a significant concern in nursing homes

as well as assisted living and home care programs. During FY 03, LTCOP assisted residents in a number of facilities that closed. LTCOP's role is to ensure safe and appropriate transfers and placements for consumers who are displaced by facility closures. During FY 03, LTCOP assisted residents in seven long-term care facilities that closed, including the closure of two Adult Family Care Homes. LTCOP continues to review the performance of its program in order to best assist consumers. During FY 03, "Consumer Satisfaction Surveys" continue to be a helpful quality assurance measure of our complaint investigation procedures. This report includes copies of several surveys received from consumers. See Attachment "B". The following sections of this report discuss complaint investigations in each long-term care setting.

6. Nursing Home Advocacy

During the 2nd six-month reporting period, January through June 2003, LTCOP investigated 444 nursing home complaints, including,

- ✓ 122 *Care* complaints.
- ✓ 45 *Physical plant* complaints
- ✓ 34 *Food/dietary* complaints.
- ✓ 28 *Staffing* complaints.

During FY 03, LTCOP investigated **962** nursing home complaints, including **252** *care complaints*. Care complaints include 14 complaints about how accidents were handled, 51 call bell complaints, 59 care plan complaints, and 43 medication complaints. There were **97** *environment/physical plant* complaints, including 40 complaints about odors and 18 complaints about physical plant hazards. Consumers continued to have quality of care concerns related to staffing issues, and facilities continued to be cited for staffing deficiencies. **LTCOP met quarterly with the Division of Licensing and Certification to review nursing facility issues. **LTCOP monitored facilities where the deficiencies cited during annual survey indicated that residents were 'at risk.' **During FY 03, the Ombudsman Program helped families establish **Family Councils** in nursing facilities. LTCOP staff developed materials to educate families, friends, and facility staff concerning how to develop family councils. Family Councils give families and friends an opportunity to meet with stakeholders to ensure that residents receive quality care. Two facilities now have family councils because of LTCOP staff and volunteers - Rumford Community Home and Russell Park Manor. LTCOP staff and a volunteer met with families and facility staff to help get Family Councils established. Family Councils also provided an arena for families to become educated in order to effectively advocate for residents' rights. Family Councils are a success, and LTCOP will continue to facilitate their formation. **The

Ombudsman's "Guide to Resident Rights in Nursing Homes" is included in each resident's admission packet. The guide is updated as needed.

7. Assisted Living Advocacy

During the 2nd six-month reporting period, January through June 2003, LTCOP investigated 175 assisted living complaints including:

- ✓ **29** Abuse complaints
- ✓ **16** Discharge/admission complaints
- ✓ **27** Care complaints

During FY 03, LTCOP investigated **359** assisted living complaints, including **36** abuse complaints, **33** resident rights complaints, **27** discharge/admission complaints, and **59** care complaints. Care complaints include 22 medication complaints, 11 care plan complaints, and 10 personal hygiene complaints. There were **31** environment/physical plant complaints. **LTCOP actively participated in numerous meetings about assisted living options in Maine, including a number of meetings about the regulation and financing of apartment living with services – formerly known as congregate housing. Assisted living programs continue to admit consumers who have a higher level of acuity than in the past. **The Ombudsman Program distributed hundreds of their program brochures to providers who, in turn, gave the rights brochure to residents upon admission. The Maine Health Care Association published a notice in its membership newsletter stating that LTCOP brochures were available. LTCOP distributed 1,500 brochures to assisted living providers as a result of the MHCA newsletter notice. LTCOP continues to receive provider requests for this brochure. **The Ombudsman Program continues to work with a committee charged with drafting a standard admission contract that will be used by all assisted living providers. **The Ombudsman Program published a "Guide to Consumer Rights in Assisted Living Facilities." The guides are distributed to consumers, families, friends, advocates, providers, etc. **LTCOP meets quarterly with the Assisted Living Licensing Unit, and this resulted in improved collaboration and communication with the ALLU.

8. Home Care Advocacy

During the 2nd six-month reporting period, January through June 2003,

- ✓ LTCOP investigated **124** home care complaints
- ✓ Most often consumers seek our assistance regarding eligibility and staffing issues.

During FY 03, consumers continue to prefer to receive services in their homes. LTCOP received **293** *home care* complaints during this fiscal year. LTCOP responded to individual complaints about home care issues, as well as answered numerous questions when individuals called the Ombudsman Program for information and advice. **In several arenas, LTCOP voiced the need for policy changes in determining eligibility for home care services. For example, the Ombudsman chaired a sub-committee of the Long-term Care Implementation Committee that reviewed the MED Assessment tool and the Medicare OASIS tool. The sub-committee recommended that the MED Assessment be discontinued for consumers who receive services from the so called ‘Section 40’ Home Health Care Program because it duplicates Medicare OASIS. **The Ombudsman Casework Supervisor *meets quarterly* with the Program Director of Elder Independence of Maine [EIM]. **As advocates for improved home care options, LTCOP actively participated in regularly held meetings concerning consumer care, including the Quality Review Committee [QRC], the Quality Assurance Review Committee [QARC] and the Southern Maine Long-term Care [SMLTC] Workgroup. Involvement with the long-term care community allows all stakeholders to share information and ideas that are beneficial to consumers served by the Ombudsman Program. **During FY 03, LTCOP was honored to receive the ‘Home Care Advocate of the Year’ award from the Maine Home Care Alliance.

9. Information and Assistance Services

During the 2nd six-month reporting period, January through June 2003, LTCOP responded to

- ✓ **633** calls, emails, and web inquiries from consumers, families, friends, legislators, etc. seeking information and assistance about long-term care issues.

During FY 03, the Ombudsman Program responded to **1,299** *telephone calls, emails, and web inquiries* for information and assistance about long-term care issues. This is a **9 % increase** over FY 02. The Ombudsman Program has a full-time intake worker who handles Information and Referral Services [I&R]. Most LTCOP staff are now cross-trained to complete the I&R computer data entry screens. This valuable service provided by LTCOP gives needed information to many individuals throughout the state and is an efficient and economical use of LTCOP resources and staff. LTCOP has a ‘no wrong number’ policy – we try to help all callers. LTCOP’s goal is to give consumers the ability to make informed decisions about long-term care issues.

10. Referrals to enforcement agencies

During the 2nd six-month reporting period, January through June 2003, LTCOP referred

- **138** complaints to enforcement or legal advocacy agencies.

The Ombudsman Program promotes resident rights and quality care. During FY 03, **257 referrals** were made to enforcement agencies, including the Division of Licensing & Certification for nursing homes, the Assisted Living Licensing Unit, the Home Health Licensing Unit, the Hospital Licensing Unit, and Adult Protective Services. LTCOP made **123 referrals** to legal advocacy agencies, including Legal Services for the Elderly, Inc., the Disability Rights Center, Advocates for Medicare Patients, the Elder Advocacy Hotline, Community Mediation Services, and Pine Tree Legal Assistance, Inc. Quarterly meetings are held with licensing and certification staff to share information and ensure that facilities at risk receive increased monitoring visits. LTCOP has a web site consumers and family may access for information about the long-term care system. The Ombudsman Program strives to help as many consumers as possible.

III. Staff Education & Volunteer Program

11. LTCOP staff education.

During the 2nd six-month reporting period, January through June 2003, LTCOP staff attended training sessions on some of the following educational topics in order to hone their skills as advocates for long-term care consumers.

During FY 03, LTCOP staff attended the following training sessions. LTCOP strives to provide on-going opportunities for staff to remain up-to-date on long-term care issues that affect the quality of consumer care and consumer rights. Education topics included:

- ◆ Health Insurance
- ◆ Fair Hearings
- ◆ Geriatrics
- ◆ Activities in long-term care facilities
- ◆ NHCQF – services and referral process
- ◆ NHCQF – quality initiative
- ◆ NHCQF – home care quality initiative
- ◆ Medicare and Medicaid/MaineCare training
- ◆ Adult Protective Services
- ◆ Pharmacology and the elderly
- ◆ Aging
- ◆ Residents with behavior issues

- ◆ Brain injury
- ◆ The Disability Rights Center – services and referral process
- ◆ Basic interviewing skills
- ◆ Creative leadership skills
- ◆ Mediation certification
- ◆ Geriatric Rehabilitation
- ◆ Mental Health and the law
- ◆ Alzheimer's and dementia
- ◆ Ethics
- ◆ Iris Network
- ◆ Documentation
- ◆ Pain
- ◆ Dr. Susan Wehry conference
- ◆ Best Friends
- ◆ “Scope and Severity” by DHS

12. Volunteer Program Report

During the 2nd six-month reporting period, January through June 2003, Volunteer Ombudsman:

- ✓ Made **722** visits.
- ✓ Handled **135** complaints.
- ✓ Held **39** In-services on Resident Rights for long-term care facility staff.

Volunteer Advocacy Efforts. During FY 03, **68** Volunteer Ombudsman Representatives were assigned to **52 nursing facilities**, and **52 residential care facilities** across the state. Volunteers made **1,501 visits** to residents in long-term care facilities. As a result, Volunteers reported and handled **306 complaints** on behalf of residents. Through the efforts of Regional Coordinators and Volunteers, the Volunteer Program provided **84 Resident Rights In-services** to facility staff. The *attached report* contains detailed information about the following: [1] volunteer advocacy efforts, [2] volunteer monitoring visits, [3] volunteer training forums and meetings, and [4] volunteer recruitment and community outreach. *See Attachment “C”*.

IV. Public Policy & Legislative Advocacy

13. **Rulemaking.** During FY 03, in addition to casework advocacy, the Ombudsman Program actively participated in the state rule making process to help address the many complex issues regarding the regulations governing the provision of long-term care services. During FY 03, LTCOP participated extensively in the rule making process concerning the regulations governing the assisted living programs in Maine. The Ombudsman Program also commented on consumer-directed personal care assistance rules, private duty nursing and personal care services rules, and

home health care rules. As consumer advocates, we keep the consumer's interest in focus when reviewing proposed changes to programs relied upon by consumers. To accomplish this, LTCOP reads the weekly notice of rulemaking and reviews any proposed rules that affect long-term care consumers. After careful review and discussion with stakeholders, LTCOP often submitted written comments and testified at public hearings to voice the impact rule changes may have on consumers. When invited by the Bureau of Elder and Adult Services, LTCOP actively participates in workgroups that develop regulatory language prior to publication of proposed rules. LTCOP considers participation in workgroups that shape proposed language the most effective and efficient use of LTCOP time and resources.

14. **Committee work.** During FY 03, The Ombudsman Program actively participated in regularly held meetings with stakeholders concerning consumer issues. Involvement with the long-term care community allows all stakeholders to share ideas and information that is beneficial to consumers served by the Ombudsman Program. LTCOP attends meetings held by the following groups:

- ✓ Quarterly meetings are held with L & C staff to discuss facilities at risk
- ✓ Quarterly meetings with the Assisted Living Licensing Unit to discuss facilities and programs that are at risk.
- ✓ The HCCA Quality Assurance Review Committee created by legislation drafted by LTCOP to promote effective coordination of care.
- ✓ Southern Maine Long Term Care Workgroup,
- ✓ Joint Advisory Committee on the Mental Health Needs of Older Persons,
- ✓ Olmstead Meetings
- ✓ The Best Practices Group
- ✓ The merged Maine Medicare Education Partnership Steering Committee, and the Maine Medicare Beneficiary Services Work Group. LTCOP gave several in-service trainings for Maine Medicare Partnerships.
- ✓ The Quality Assurance Review Committee [QARC]
- ✓ EIM QRC sub-committee on barriers to care
- ✓ Caregiver Committee
- ✓ Alpha-One meeting on their QARC process
- ✓ The Northeast Health Care Quality Foundation
- ✓ The Maine Alzheimer's Association sub-committee on outreach

15. **Legislative Advocacy**. During FY 03, LTCOP continued to maintain a presence at the Maine Legislature. **The legislature passed a law barring CNA employment in hospitals, nursing facilities, home health agencies, and assisted housing programs based on certain criminal convictions. To secure this consumer protection, the Ombudsman Program worked with BEAS and other stakeholders to draft the legislation. **LTCOP also supported the creation of a Long-term Care Oversight Committee to continue the efforts of two earlier groups that no longer exist – the Long-term Care Implementation Committee and the Long-term Care Steering Committee. **LTCOP worked with stakeholders on the state budget legislation to ensure that long-term care consumers were protected as much as possible from extreme hardship when services were reviewed for reduction based on the need to find ways to accomplish cost savings in Maine. LTCOP was directed by the Health and Human Services Committee to lead a meeting of stakeholders to find ways to cut costs in the services provided by the Department of Human Services. **LTCOP also worked on the following legislation:

- ◆ The duties of personal representatives.
- ◆ CNA training program applicants submitting a criminal background check.
- ◆ Clarification of the duties of conservators.
- ◆ Establish a study group to ensure appropriate care for older persons with dementia and related cognitive and behavioral issues in long-term care facilities.
- ◆ Promote recruitment and retention of Direct Care Workers in long-term care.
- ◆ The role of assisted living
- ◆ Public notification of deficient care in long-term care settings.
- ◆ Reduction of regulatory burdens of home health agencies
- ◆ Standard Contracts for Assisted Housing Programs.
- ◆ Major Substantive regulations governing Assisted Housing Programs.
- ◆ Regulatory reforms and staffing issues in long-term care facilities
- ◆ State budget legislation

APPENDIX C

INGRAHAM'S VOLUNTEER PROGRAM

Jennifer Van Damm, Volunteer and Recruiting Coordinator, made the following information available to the Child Welfare Services Ombudsman for Ingraham.

Mission of Ingraham

- To assist people in crisis
- To provide people in need with a safe environment, access to services, and the opportunities and means to help themselves.
- To identify unmet human needs
- To act as a catalyst for the development of new social policies and resources in the state of Maine

Ingraham pursues its mission through its crisis services (including a 24-hour hotline), community support services, and transitional and permanent residential programs for teenagers and adults. Ingraham provides services for people dealing with homelessness, mental illness, substance abuse, and thoughts of suicide; many experience a combination of those issues.

Ingraham's Use of Volunteers Today

Ingraham has approximately 100 volunteers who serve in a variety of capacities to assist the agency in fulfilling its mission. The duties of the volunteers vary from one-day event assistance to weekly services answering the crisis hot line. There are approximately 22 volunteers who work with Ingraham on a weekly basis.

Recommendations for Volunteer Programming

- Be creative in considering how volunteers can be utilized in reaching the goals of the agency.
- Have regular communication between the Volunteer Coordinator and the program managers to know how and where volunteers can be best utilized.

The Volunteer Coordinator at Ingraham asks the program managers to describe the things they would like to do with their programs if they were in a perfect world in which money is no object. With the program managers' vision in mind, the Volunteer Coordinator is able to consider how volunteers may be used to achieve those goals.

Volunteer Duties at Ingraham

- Hotline counselors (after 40 hours of training, volunteers work a minimum of three hours per week for one year answering calls to the crisis hotline)
- Administrative volunteers (assisting with mailing, reception, clerical duties)
- Program support volunteers (assisting staff with program activities)
- Board of Directors (15 professionals volunteer their time in this capacity)
- Committee Support (fundraising, public relations). A committee of about 25 individuals work throughout the year planning Ingraham's annual fundraiser. An additional 40 to 50 volunteers work on the day of the event.
- Corporate programs/United Way Day of Caring (United Way Day of Caring is a one-day event in which community members, organized by the United Way, perform tasks such as landscaping, painting, planting a garden, etc.)
- Outreach from community and church groups (roles include sponsoring Ingraham clients for holiday gifts, donating goods, etc.)

Hiring Process for Volunteers and Keys to Success

At this time, Ingraham has no formal policies or procedures for its volunteers. However, the agency is in the process of assessing its use of volunteer services and working on a strategic plan.

Ingraham does have job descriptions for on-going volunteers, such as hotline counselors. In addition, all volunteers must abide by the policies and procedures for each specific program in which the volunteer is working.

Ms. Van Damm offered the following as important factors in the success of any volunteer program:

- Comprehensive Interview –Ingraham has a detailed application to be completed by a prospective volunteer, in addition to the interview.
- Agency Buy-In – Support for volunteers must exist at all levels of the organization and should start from the top down.
- Adequate training – It is important to provide the volunteers with the tools necessary for them to be successful in their endeavors.
- Clear expectations –Clearly express expectations for each volunteer, and be sure to understand the volunteer's expectations as well. It is important that all expectations are realistic and consistent.
- Support, Support, Support – The agency must provide the volunteers with support every step of the way. The goal is for the volunteer to have a positive experience so that the agency, its clients and the volunteer all benefit from the relationship.

APPENDIX D

MAINE COURT APPOINTED SPECIAL ADVOCATE PROGRAM (CASA)

Karen Grossman, Volunteer Coordinator, made the following information available to the Child Welfare Services Ombudsman for CASA through personal conversations. Mary Milam provided additional information from previous research on Maine's CASA program.

In 1977, Judge David Soukup of King County, Washington, initiated a novel approach to child representation in child protective proceedings. Concerned about the quality of the information he was receiving from well-intentioned but overworked lawyers and social workers, Judge Soukup suggested using volunteers to serve as advocates for children. He argued that volunteers could be provided with specialized training on representing a child's best interests in judicial proceedings, and then given the same protection and investigation abilities as attorneys. He called these lay-guardians "court appointed special advocates" (National CASA Association).

In 1985, eight years after the successful implementation of the pilot program in Washington State, the Maine CASA program was established as part of the State's Judicial Branch (Title 4, Chapter 31). The Maine CASA program is a member of the National CASA Association (NCASAA) which supports state and local CASA programs through funding and guidance.

Mission Statement

- To speak for the best interests of abused and neglected children who are involved in the juvenile courts (NCASAA).

Roles and Responsibilities

As Guardians ad litem, CASAs must abide by the "Rules for Guardians ad Litem" and "Standards of Practice for Guardians ad Litem" which were issued in 2000 by the Supreme Judicial Court and published in *Maine Rules of Court* by West Group, 2001. GALs must also abide by State Statute (Title 22, Chapter 1071, Section 4005, 1). The potential roles a CASA may take under the Rules and Statute are:

- Fact finder
- Legal representative
- Case monitor
- Mediator
- Information & Resource broker

The responsibilities of a GAL are spelled out also in the Rules and Statute to include:

- Understanding and upholding the law
- Completing timely, fair investigations
- Making well-reasoned, defensible recommendations on the best interests of the child

Maine CASA prepares its volunteers to take on the roles and responsibilities of being a GAL by following the guidelines for volunteer management established by the NCASAA.

Volunteer Management

As a member of the NCASAA, the Maine CASA program is guided by national standards in the management of volunteers. NCASAA requires that each program provide a “framework for recruitment, retention and evaluation of volunteers” (NCASA Standard VIII, NCASAA Standards Self-Assessment – June 2003). Currently, Maine has 131 volunteers around the state. These volunteers are managed from the CASA office in the West Bath District Courthouse. The following are the guidelines, with some highlights for each, which have been established by NCASAA for volunteer management as stated in the NCASAA Standards Self-Assessment – June 2003:

The CASA program has written plans for recruiting and selecting volunteers.

- A prepared standardized packet of information about volunteering.
- A recruitment plan with targeted strategies for attracting diverse volunteers.

The CASA program has selection criteria and an application process for its volunteers.

- A minimum age of 21 for volunteers.
- A screening procedure that includes a written application, personal interview, reference check and criminal records check.

The CASA program (1) plans and implements a training and development program for volunteers to improve their knowledge, skills and abilities and (2) provides information about the backgrounds and needs of the children served by the program. The training consists of at least 30 hours of pre-service training and 12 hours of in-service training per year.

- A training program which includes: roles and responsibilities, court process, child development, child abuse and neglect, family dynamics, confidentiality, permanency planning, cultural awareness and more.

The CASA program provides adequate supervision for its volunteers.

- A volunteer/supervisor ratio of 30 to 1 or less.

- A volunteer's assignment is limited to no more than two children/sibling groups at a time.

The roles and responsibilities of the CASA volunteer are clearly communicated through written policies, job descriptions and training, and are reinforced through the supervisory process.

- A written manual of volunteer policies and procedures.

The CASA program has policies in place for the transportation of children by the volunteers.

- Insurance maintained by the program to cover liability.
- A volunteer must have a driver's license, automobile insurance and a safe driving record.

The CASA program has policies and procedures for the discharge or termination of a CASA volunteer.

- A specification of conditions for disciplinary action.
- A specification of conditions for non-voluntary termination of volunteers.

The CASA program maintains a written record for each volunteer.

- A volunteer's written record must include: demographic information, emergency contacts, job description, reference documentation, security check documentation, training records and performance evaluations.

The NCASAA requires that each of the local and state programs it supports through funding meet program guidelines for their organizations. In order to assist programs with this, NCASAA has established a website known as CASAnet (www.casenet.org) which provides programs with information and examples on meeting all NCASAA standards.

APPENDIX E

SUBCHAPTER X-A

CHILD WELFARE SERVICES OMBUDSMAN

§4087. Child welfare services ombudsman (Repealed, 2001)

§4087-A. Ombudsman program

1. **Definitions.** As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Ombudsman" means the director of the program and persons employed or volunteering to perform the work of the program.

B. "Program" means the ombudsman program established under this section.

2. **Program established.** The ombudsman program is established as an independent program within the Executive Department to provide ombudsman services to the children and families of the State regarding child welfare services provided by the Department of Human Services. The program shall consider and promote the best interests of the child involved, answer inquiries and investigate, advise and work toward resolution of complaints of infringement of the rights of the child and family involved. The program must be staffed, under contract, by an attorney or a master's level social worker who must have experience in child development and advocacy, and support staff as determined to be necessary. The program shall function through the staff of the program and volunteers recruited and trained to assist in the duties of the program.

3. **Contracted services.** The program shall operate by contract with a nonprofit organization that the Executive Department determines to be free of potential conflict of interest and best able to provide the services on a statewide basis. The ombudsman may not be actively involved in state-level political party activities or publicly endorse, solicit funds for or make contributions to political parties on the state level or candidates for statewide elective office. The ombudsman may not be a candidate for or hold any statewide elective or appointive public office.

4. **Services.** The program shall provide services directly or under contract. The first priority in the work of the program and any contract for ombudsman services must be case-specific advocacy services. Any work on systems improvements or lobbying must be adjunctive to case-specific activities. The program may:

A. Provide information to the public about the services of the program through a comprehensive outreach program. The ombudsman shall provide information through a toll-free telephone number or numbers;

B. Answer inquiries, investigate and work toward resolution of complaints regarding the performance and services of the department and participate in conferences, meetings and studies that may improve the performance of the department;

C. Provide services to persons to assist them in protecting their rights;

D. Inform persons of the means of obtaining services from the department;

E. Provide information and referral services;

F. Analyze and provide opinions and recommendations to agencies, the Governor and the Legislature on state programs, rules, policies and laws;

G. Determine what types of complaints and inquiries will be accepted for action by the program and adopt policies and procedures regarding communication with persons making inquiries or complaints and the department;

H. Apply for and utilize grants, gifts and funds for the purpose of performing the duties of the program; and

I. Collect and analyze records and data relevant to the duties and activities of the program and make reports as required by law or determined to be appropriate.

4-A. Information for parents in child protective cases. The program, in consultation with appropriate interested parties, shall provide information about child protection laws and procedures to parents whose children are the subject of child protective investigations and cases under this chapter. The providing of the information under this subsection does not constitute representation of parents. Parents may seek and receive information regardless of whether they are represented by legal counsel. The information must be provided free of charge to parents.

The program shall report annually to the joint standing committee of the Legislature having jurisdiction over judiciary matters, starting February 1, 2003, on the provision of information required by this subsection.

This subsection does not create new rights or obligations concerning the provision of legal advice or representation of parents. Failure to provide information under this subsection does not create a cause of action or have any effect on a child protective proceeding.

5. Access to persons, files and records. As necessary for the duties of the program, the ombudsman has access to the files and records of the department, without fee, and to the personnel of the department for the purposes of investigation of an inquiry or complaint. The ombudsman may also enter the premises of the department for the purposes of investigation of an inquiry or complaint without prior notice. The program shall maintain the confidentiality of all information or records obtained under this subsection.

6. Confidentiality of records. Information or records maintained by the program relating to a complaint or inquiry are confidential and may not be disclosed unless the disclosure is permitted by law and consented to by the ombudsman or ordered by court. Records maintained by the program are not public records as defined in Title 1, chapter 13.

7. Liability. Any person who in good faith submits a complaint or inquiry to the program pursuant to this section is immune from any civil or criminal liability. For the purpose of any civil or criminal proceedings, there is a rebuttable presumption that any person acting pursuant to this section did so in good faith. The ombudsman and employees and volunteers in the program are employees of the State for the purposes of the Maine Tort Claims Act.

8. Penalties. A person who intentionally obstructs or hinders the lawful performance of the ombudsman's duties commits a Class E crime. A person who penalizes or imposes a restriction on a person who makes a complaint or inquiry to the ombudsman as a result of that complaint or inquiry commits a Class E crime. The Attorney General shall enforce this subsection under Title 5, section 191.

9. Information. Beginning January 1, 2002, information about the services of the program and any applicable grievance and appeal procedures must be given to all children and families receiving child welfare services from the department and from all persons and entities contracting with the department for the provision of child welfare services.

10. Report. The program shall report to the Governor, the department and the Legislature before January 1st each year on the activities and services of the program, priorities among types of inquiries and complaints that may have been set by the

program, waiting lists for services, the provision of outreach services and recommendations for changes in policy, rule or law to improve the provision of services.

11. Oversight. The joint standing committee of the Legislature having jurisdiction over health and human services matters shall review the operations of the program and may make recommendations to the Governor regarding the contract for services under this section. The committee may submit legislation that it determines necessary to amend or repeal this section.