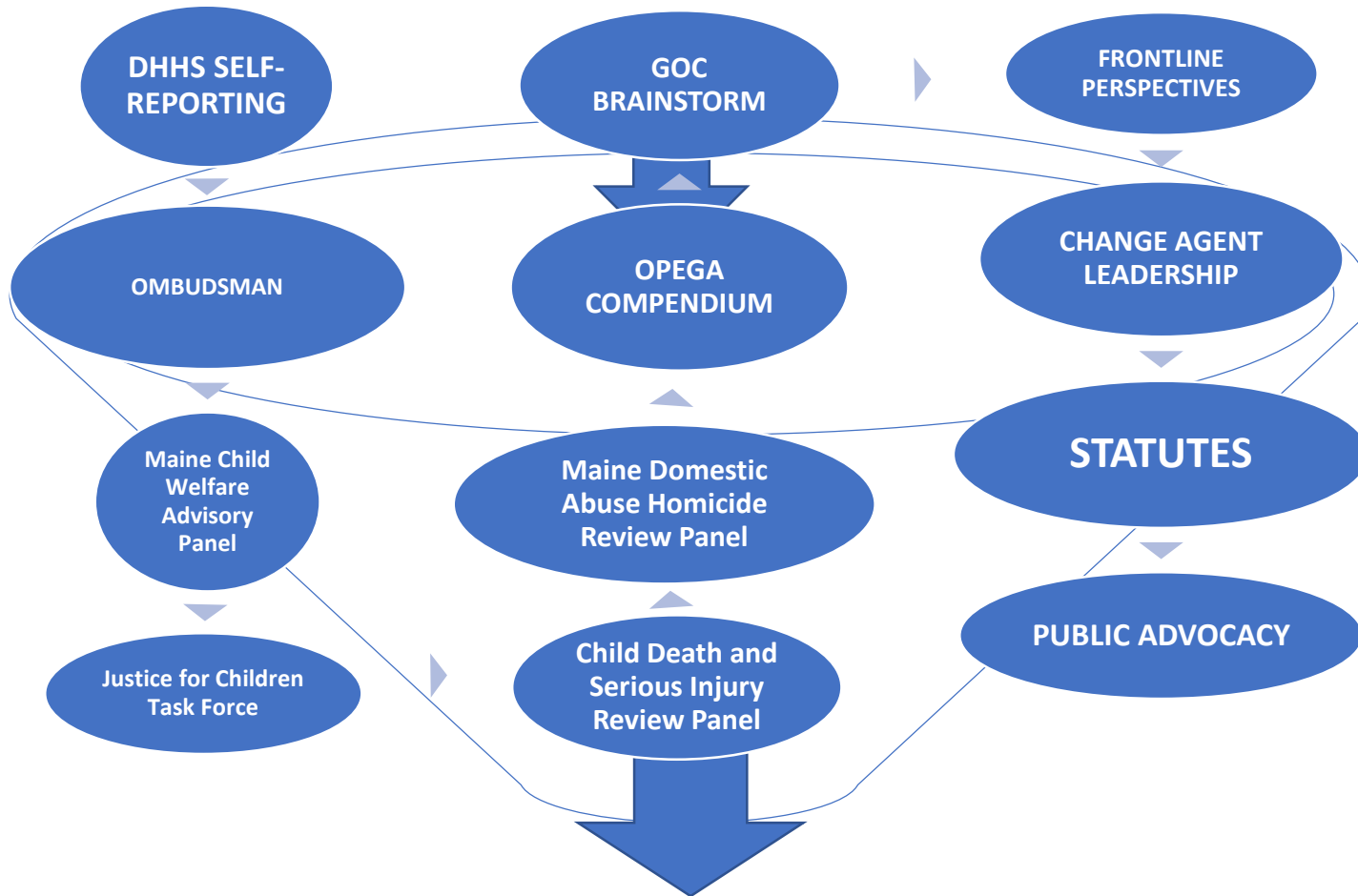


INTENSIVE WORK SESSIONS – GOVERNMENT OVERSIGHT COMMITTEE



ROAD MAP FOR LEGISLATIVE ACTION

DHHS SELF-REPORTING

[Child Welfare Reports | Department of Health and Human Services \(maine.gov\)](#)

[Maine Annual Services and Programs FFY 2024.pdf](#)

The screenshot shows the website for the Maine Department of Health and Human Services, Office of Child and Family Services. The page is titled "Child Welfare Reports" and features a navigation menu with options like "OCFS Home", "About Us", "Support for Families", "Provider Resources", and "Data, Reports, and Initiatives". A sidebar on the left lists various dashboards, with "Child Welfare Reports" selected. The main content area is divided into three sections: "Child Protective Services Report", "Child and Family Services Plans and Reports", and "Annual Reports".

Child Protective Services Report
Each year the Office of Child and Family Services produces an annual Child Protective Services (CPS) Report that provides information regarding the number of child abuse reports received each year and what happens with those reports. The information provided includes report source, family composition, numbers of families where child maltreatment was found, age and gender of maltreatment victims, and other general categories

- [2021 - \(PDF\)](#)
- [2020 - \(PDF\)](#)
- [2019 - \(PDF\)](#)
- [2018 - \(PDF\)](#)
- [2017 - \(PDF\)](#)
- [2016 - \(PDF\)](#)
- [2015 - \(PDF\)](#)
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- [2007 - \(PDF\)](#)
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- [2005 - \(PDF\)](#)
- [2004 - \(PDF\)](#)
- [2003 - \(PDF\)](#)

Child and Family Services Plans and Reports
The Children's Bureau, an Office of the Federal Administration for Children & Families oversees each state's Child and Family Services Plan (CFSP) which is a five-year strategic plan that sets forth the vision and the goals to be accomplished to strengthen the states' overall child welfare system. The Annual Progress and Services Report (APSR) provides annual updates on the progress made toward accomplishing the goals and objectives in the CFSP.

- [Maine Annual Services & Progress FFY 2024 \(PDF\)](#)
- [Maine Child & Family Services Plan FFY 2020-2024 \(Word\)](#)
- [Maine Child & Family Services Plan FFY 2015-2019 Final Report \(Word\)](#)
- [Maine Annual Services & Progress FFY2023 \(Word\)](#)
- [Maine Annual Services & Progress FFY2022 \(Word\)](#)
- [Maine Annual Services & Progress Update FFY2021 \(Word\)](#)
- [Maine Program Improvement Plan eff. 02.2020](#)
- [Maine Annual Progress & Services Report 2018 \(Word\)](#)
- [Maine CFSR Statewide Assessment 2017 \(Word\)](#)
- [Maine Child & Family Services Review 2017 Final Report](#)
- [Maine Annual Progress & Services Report 2017 \(PDF\)](#)
- [Maine Annual Progress & Services Report 2016 \(Word\)](#)
- [Maine Annual Progress & Services Report 2015 \(Word\)](#)

Annual Reports

- [Maine Safety Science Model 2022 Report \(PDF\)](#)
- [2023 Workload Report \(PDE\)](#)
- [Child Welfare Annual Report, Calendar Year 2022 \(PDF\)](#)
- [OCFS Response to the Child Welfare Ombudsman's 2022 Report \(PDF\)](#)
- [2022 Workload Report \(PDF\)](#)
- [OCFS Response to the Child Welfare Ombudsman's 2021 Report](#)
- [Child Welfare Annual Report, Calendar Year 2021](#)
- [2021 Workload Report \(PDF\)](#)
- [2020 Workload Report \(PDF\)](#)

Casey Family Program Review Summary and Recommendations
In July of 2021 the Department asked Casey to evaluate existing child safety policies in the context of five child fatalities that occurred in June of 2021 and to offer interim policy recommendations that could be implemented by the State of Maine to support child and family safety. Casey partnered with Collaborative Safety, an organization that uses safety science methods to conduct critical incident reviews, to conduct this independent assessment. Casey has partnered with Collaborative Safety to conduct such reviews in other child welfare jurisdictions throughout the country. This document encompasses the summary and recommendations that resulted from their review.

- [Maine Review Summary Report and Recommendations](#)

Child Fatality Report
[Dashboard of quarterly and annual child fatality reports in Maine.](#)

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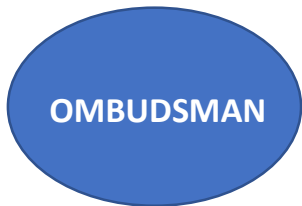
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Annual Service & Progress Reports FFY 2021 – 2024 (with page numbers of State responses in 2024 ASPR)	FFY '21 4/1/19-3/31/20	FFY '22 4/1/20-3/31/21	FFY '23 4/1/21-3/31/22	FFY '24 4/1/22-3/31/23	Avg of Prior 3 Years ¹ ('21 – '23)	Page No. of Item Description & State Response ASPR FFY '24
Percent of Cases Rated as Strength						
Desired Outcomes						
A. Safety						
1 Timeliness of initiating investigations of reports of child maltreatment	70%	75%	65%	78%	70.0%	11
2 Services to family to protect children in the home and prevent removal or re-entry into foster care	35%	27%	36%	51%	32.6%	12
3 Risk and safety assessment and management	35%	29%	25%	35%	31.0%	14
4 Stability of Placement	65%	84%	80%	75%	76.3%	16
5 Permanency goal for child	43%	53%	50%	55%	48.7%	18
6 Achieving Reunification, PG, ADO, OPPLA	26%	28%	15%	25%	23.0%	19
7 Placement with siblings	95%	83%	93%	94%	90.3%	20
8 Visiting with parents and siblings in foster care	56%	44%	47%	46%	49.0%	21
9 Preserving connections	73%	46%	42%	58%	53.7%	23
10 Relative Placement	79%	65%	63%	69%	69.0%	24
11 Relationship of child in care with parents	60%	47%	47%	60%	51.3%	25
12 Needs and services of child, parents, and foster parents	28%	17%	12%	21%	19.0%	27
12A Needs Assessment of Children	52%	41%	32%	45%	41.7%	28
12B Needs Assessment of Parent(s)	22%	17%	10%	20%	16.3%	28
12C Needs Assessment of Foster Parents	55%	54%	55%	64%	54.7%	28
13 Child and family involvement in case planning	28%	21%	14%	24%	21.0%	30
14 Caseworker visit with child	48%	35%	28%	38%	37.0%	31
15 Caseworker visit with parent(s)	19%	14%	10%	16%	14.3%	34
16 Educational needs of child assessed and addressed	63%	43%	53%	66%	53.0%	36
17 Physical health needs of child assessed and addressed	64%	35%	39%	42%	46.0%	37
18 Mental/behavioral health needs of child assessed and addressed	41%	15%	14%	25%	23.3%	39
Systemic Factors (qualitative metrics)						
19: Statewide Information System						40
B. Case Review System						
20: Written Case Plan						42

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Notes:	
¹ Straight average of scores of prior 3 years (FFY '21 – FFY '23), not accounting for sample size differences.	
Sources: Annual Services & Progress Reports 2021 – 2024	
FFY '21 https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/State%20of%20Maine%20FFY%202021%20APSR_FINAL_0.docx	
FFY '22 https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine%20FFY%202022%20APSR%20Final.docx	
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FFY '24 https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine%20Annual%20Services%20and%20Programs%20FFY%202024.pdf	
Prepared by OPEGA: 10/20/2023.	



MAINE CHILDREN'S OMBUDSMAN

Publications

Pursuant to 22 M.R.S.A. § 4087-A the Ombudsman must report annually to the Governor, Legislature, and to the Department of Health and Human Services. The Program reports are available here and by request to the Ombudsman's office.

- [Child Welfare Services Ombudsman Annual Report 2022](#)
- [Child Welfare Services Ombudsman Annual Report 2021](#)
- [Child Welfare Ombudsman Responds to Recent Child Deaths, June 24, 2021](#)
- [Child Welfare Services Ombudsman Annual Report 2020](#)
- [Child Welfare Services Ombudsman Annual Report 2019](#)
- [Child Welfare Services Ombudsman Annual Report 2018](#)
- [Child Welfare Services Ombudsman Annual Report 2017](#)
- [Child Welfare Services Ombudsman Annual Report 2016](#)
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[Maine Child Welfare Ombudsman
\(cwombudsman.org\)](http://cwombudsman.org)

[2022-Annual-Report-Maine-Child-
Welfare-
Ombudsman.pdf \(cwombudsman.org\)](#)



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Maine Child Welfare Advisory Panel

MCWAP FATHER LISTENING SESSIONS

Formed in December 2015, The Maine Child Welfare Advisory Panel (MCWAP) is a multidisciplinary task force. It is comprised of private citizens and professionals from selected disciplines involved in handling child abuse and neglect. Meeting monthly, the panel ensures the state system is meeting the safety, permanency, and well-being of children and families through assessment, research, advocacy, and greater citizen involvement. Its goal is to promote child safety and quality services for children, youth and families.



MCWAP works with the Child Death and Serious Injury Review Panel and Maine's Justice for Children's Task Force to evaluate and strengthen Maine's child protective services. The Children's Justice Act (CJA) grant under the Federal Child Abuse Prevention and Treatment Act (CAPTA) funds all three panels. Maine's Governor designated The Maine Department of Health and Human Services as the state agency to apply for CJA funding.

This funding is provided to states to improve the investigation, prosecution, and judicial handling of child abuse and neglect cases. Especially child sexual abuse and exploitation cases, in a manner limiting additional trauma to the child victim. The Division of Child Welfare is the administrative agent for the Children's Justice Act grants.



The Maine Child Welfare Advisory Panel maintains representation from, but not limited to:

- The law enforcement community
- The judicial system
- Child advocates, including attorneys and court-appointed special advocates (CASA)
- Criminal prosecutors
- Health and mental health professionals
- Maine's child welfare system
- Agencies or individuals experienced in working with children with disabilities
- Parents who have been involved with the child welfare system
- Agencies or individuals representing domestic violence and sexual assault services
- Clergy
- Youth survivors of child abuse and neglect over the age of 18

[Maine Child Welfare Advisory Panel |
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\(mecitizenreviewpanels.com\)](http://MaineChildWelfareAdvisoryPanel.org)



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12th Biennial Maine Domestic Violence Homicide Review Panel Report Now Available >>

Maine Coalition to End Domestic Violence > Blog > Latest News > 12th Biennial Maine Domestic Violence Homicide Review Panel Report Now Available

12th Biennial Maine Domestic Violence Homicide Review Panel Report Now Available

October 10, 2018

On Tuesday, October 9th, MCEDV gathered with community partners, including representatives from the Attorney General's office, law enforcement, and surviving family members to announce the release of the 12th Report of the Maine Domestic Violence Homicide Review Panel.

The Report, produced through the Attorney General's Office, focuses on identifying specific ways in which systems and institutions in Maine can better keep victims safe, hold abusive people accountable, and is released every other year.

In her remarks, MCEDV Executive Director Francine Garland Stark noted that the 2018 Maine Domestic Violence Homicide Review Panel Report reiterates the heightened level of risk when someone is leaving an abusive partner, "As the report shows, the time around leaving an abusive partner is the most dangerous time, and so we must all recognize that leaving, in of itself, does not end the abuse"

You can find the full 2018 Report [here](#).

Recent Posts >>

- ▷ MCEDV Launches New Film to Promote Direct Financial Assistance for Survivors
- ▷ Domestic Violence Awareness Month 2023: Statewide Events
- ▷ MCEDV Dives Deep to Move Needle on Firearms and Domestic Abuse
- ▷ MCEDV Video Features Survivor-Advocates
- ▷ MCEDV Releases First Annual Impact Report at Statehouse Event, Shows Progress in Maine's Work to End Domestic Abuse

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CDSIRP

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IMPROVING THE SAFETY & WELL-BEING OF CHILDREN IN THE STATE OF MAINE

Child Death & Serious Injury Review Panel

The Child Death and Serious Injury Review Panel's mission is to promote child health and well-being, improve child systems, and educate the public and professionals who work with children to prevent child deaths and serious injuries. The Panel accomplishes this mission through collaborative, multidisciplinary, comprehensive case reviews, from which recommendations to state and local governments and public and private entities are developed.



The Child Death & Serious Injury Review Panel follows the review protocol outlined below:

- The Panel will review cases of children up to age 18 suspected of having suffered fatal child abuse or neglect or a severe injury resulting from child abuse or neglect.
- The Panel will conduct comprehensive, multidisciplinary reviews of specific cases recommended by the Office of Child Abuse and Family Services, the Commissioner of the Department of Health and Human Services (DHHS), or by any multidisciplinary review member panel.
- Cases may be selected from a monthly report including severe injuries and deaths in the preceding month or a summary of deaths and severe injuries from the prior year.
- All relevant case materials will be accumulated by the DHHS staff and the Panel Coordinator and securely disseminated to the review panel members to maintain confidentiality.
- After reviewing all confidential material, the review panel will convene to provide a confidential summary report of findings and recommendations to appropriate Maine DHHS management, including the DHHS Commissioner.
- In consultation with the DHHS Commissioner, the review panel may develop periodic reports on child abuse and serious injuries, which are consistent with state and federal confidentiality requirements.

The Maine Child Death and Serious Injury Review Panel meet annually with the teams from the other five New England states (VT, NH, CT, MA, & RI) at an annual conference to discuss relevant issues in each of our states. The site of the meeting rotates among the different states. Maine participates in the National Fatality Review Case Reporting System, into which all child deaths and severe injuries of children under 18 are entered.





[Maine Justice for Children Task Force |
Maine Citizen Reviews \(mecitizenreviewpanels.com\)](#)

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Maine Justice for Children Task Force

The Maine Justice for Children Task Force ("the Task Force") is a collaborative, multidisciplinary task force. The Maine Judicial Branch convened it to improve safety, permanency, and well-being for children in the State of Maine child welfare system. Task Force membership consists of representatives from the legislative, judicial, executive branches, and other participants, including advocates for children, parents, and individuals involved in the child welfare system.

Members of the Task Force are responsible for:

- Recognizing strengths within the child welfare system positively affects children's safety, permanency, and well-being in the State of Maine child welfare system.
- Identifying barriers within the child welfare system that harm children's safety, permanency, and well-being in the State of Maine child welfare system.
- Determining the order to identify barriers should be addressed and develop joint solutions to remove the child welfare system's obstacles.
- Recommending training needs of child welfare stakeholders.



To accomplish these goals, the Task Force:

- Holds regular meetings with all stakeholders.
- Establishes a timeline and steps for how to accomplish identified goals.
- Monitors and evaluates progress toward achieving established goals.
- Provides information and data on how quickly and effectively the state is responding to child welfare matters.
- Created subcommittees to focus on identified needs, including Continuing Education.

The membership of the Task Force includes:

- The Chief Justice of the Maine Supreme Judicial Court.
- Child advocates, including Guardians ad Litem or Court, Appointed Special Advocates.
- Parents and their advocates, including attorneys.
- Judges and attorneys involved in civil and criminal court proceedings related to child abuse and neglect.
- Individuals representing the law enforcement community.
- Healthcare and mental health professionals.
- Individuals representing child protective service agencies.
- Individuals experienced in working with children with disabilities.

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Office of Program Evaluation and Government Accountability

The Office of Program Evaluation and Government Accountability (OPEGA) exists to support the Legislature in monitoring and improving the performance of State government by conducting independent, objective reviews of State programs and activities with a focus on effectiveness, efficiency and economical use of resources. Within this context, OPEGA also evaluates compliance with laws, regulations, policies and procedures.



Using an independent perspective, OPEGA:

- provides timely and credible information for identifying risks and making decisions;
- facilitates positive change by recognizing excellence, recommending improvements and working collaboratively to assure effective action is taken; and
- fosters a more complete and accurate understanding of State government through its reports and communications.

[Click here](#) for further description of how OPEGA supports legislative oversight.

OPEGA is a non-partisan, independent legislative office.
Authorizing legislation: MRSA Title 3 §991 - §997.

OPEGA seeks to be a model for best practices in government and is committed to:

Staffing:

- Peter Schleck, Director
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- Amy Gagne, Senior Analyst
- Jennifer Henderson, Senior Analyst
- Kari Hojara, Senior Analyst
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- Lisa Plimpton, Analyst
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- Professionalism, ethics and integrity
- Participatory, collaborative approach
- Timely, effective communications
- Valuable recommendations
- Continuous improvement
- Using skilled and knowledgeable staff
- Minimizing disruption of operations
- Identifying root causes

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The Maine Child Welfare Action Network

ENSURING THE SAFETY AND WELL-BEING OF ALL MAINE CHILDREN, YOUTH, AND FAMILIES

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



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CHANGE
AGENT
LEADERSHIP

Characteristics of Transformational Leaders

- Idealized Influence:* Provides vision and sense of mission, instills pride, gains respect and trust.
- Inspiration:* Communicates high expectations, uses symbols to focus efforts, expresses important purposes in simple ways.
- Intellectual Stimulation:* Promotes intelligence, rationality, and careful problem solving.
- Individualized Consideration:* Gives personal attention, treats each employee individually, coaches, advises.

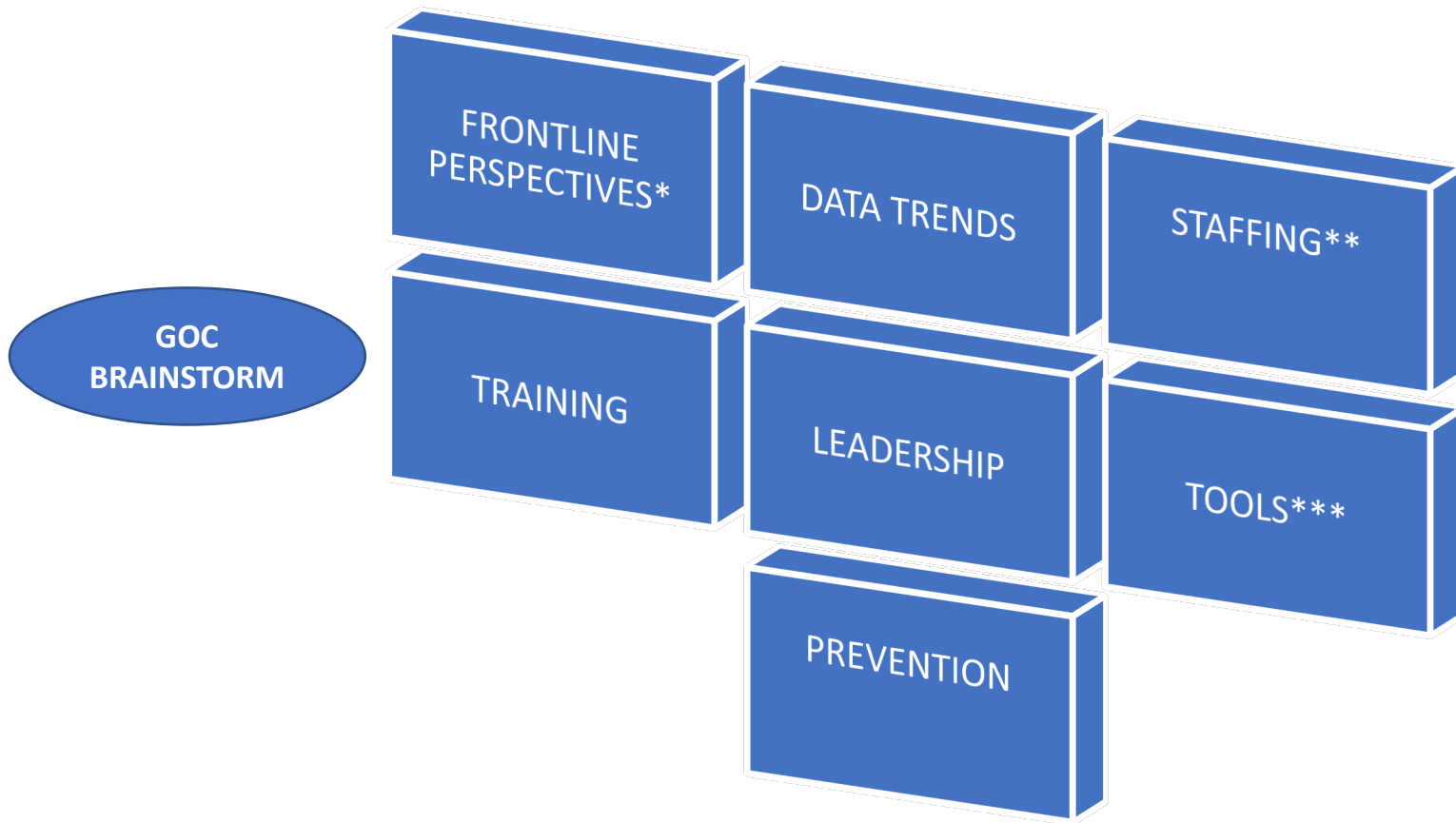
- #### 8 Steps to a successful change
1. Establish a sense of urgency
 2. Build a guiding Team
 3. Develop a vision and strategy
 4. Communicate the change vision
 5. Empower broad-based action
 6. Generate short-term wins
 7. Consolidate gains and produce more change
 8. Anchor new approaches in the culture

Characteristics of a Change Agent



- Good communication skills
- The ability to encourage participation and involvement of those whom the change affects
- The ability to minimise fears by stimulating interest and commitment, therefore reducing opposition (Buchanan & Huczynski, 2006)
- To act proactively
- Good negotiation skills
- Be an effective leader

- ### Leaders and Change Agent Traits
- ❑ Must come from the top down
 - ❑ Co-created vision not a response to legal issues
 - ❑ Possess self knowledge and awareness
 - ❑ Curious about others
 - ❑ Open to new ideas and willingness to learn
 - ❑ Doesn't live in a world of absolutes but in shades of gray
 - ❑ Can communicate clearly in various forms
 - ❑ Passionate about change
 - ❑ Ability to motivate others



*e.g., Case Workers; Mandated Reporters; Guardians ad Litem

** e.g., Hiring; Turnover; Vacancies

***e.g., Structured Decision Making

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Title 22: HEALTH AND WELFARE
Subtitle 3: INCOME SUPPLEMENTATION
Part 3: CHILDREN
Chapter 1071: CHILD AND FAMILY SERVICES AND CHILD PROTECTION ACT
 Subchapter 1: GENERAL PROVISIONS

§4004-B. Infants born affected by substance use disorder or after prenatal exposure to drugs or with a fetal alcohol spectrum disorder

The department shall act to protect infants born identified as being affected by substance use or withdrawal symptoms resulting from prenatal drug exposure, whether the prenatal exposure was to legal or illegal drugs, or having a fetal alcohol spectrum disorder, regardless of whether the infant is abused or neglected. The department shall: [PL 2019, c. 342, §2 (AMD).]

- 1. Receive notifications.** Receive notifications of infants who may be affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or who have a fetal alcohol spectrum disorder;

[PL 2019, c. 342, §2 (AMD).]
- 2. Investigate.** Promptly investigate notifications received of infants born who may be affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or who have a fetal alcohol spectrum disorder as determined to be necessary by the department to protect the infant;

[PL 2019, c. 342, §2 (AMD).]
- 3. Determine if infant is affected.** Determine whether each infant for whom the department conducts an investigation is affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or has a fetal alcohol spectrum disorder;

[PL 2019, c. 342, §2 (AMD).]
- 4. Determine if infant is abused or neglected.** Determine whether the infant for whom the department conducts an investigation is abused or neglected and, if so, determine the degree of harm or threatened harm in each case;

[PL 2019, c. 192, §2 (AMD).]
- 5. Develop plan for safe care.** For each infant who the department determines to be affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or who has a fetal alcohol spectrum disorder, develop, with the assistance of any health care provider involved in the caregiver's or the child's medical or mental health care, a plan for the safe care of the infant and, in appropriate cases, refer the child or caregiver or both to a social service agency, a health care provider or a voluntary substance use disorder prevention service. For purposes of this subsection, "health care provider" means a person described in section 4011-A, subsection 1, paragraph A, subparagraphs (1) to (10), (15), (17) to (20) or (22); and

[PL 2019, c. 342, §2 (AMD).]
- 6. Comply with section 4004.** For each infant who the department determines to be abused or neglected, comply with section 4004, subsection 2, paragraphs E and F.

[PL 2019, c. 342, §2 (AMD).]

SECTION HISTORY
 PL 2003, c. 673, §21 (NEW). PL 2013, c. 192, §2 (AMD). PL 2017, c. 407, Pt. A, §83 (AMD). PL 2019, c. 342, §2 (AMD).

The Revisor's Office cannot provide legal advice or interpretation of Maine law to the public.
 If you need legal advice, please consult a qualified attorney.

[Title 22, §4002: Definitions \(mainelegislature.org\)](http://mainelegislature.org)

Title 22: HEALTH AND WELFARE
Subtitle 3: INCOME SUPPLEMENTATION
Part 3: CHILDREN

Chapter 1071: CHILD AND FAMILY SERVICES AND CHILD PROTECTION ACT
Subchapter 1: GENERAL PROVISIONS

§4002. Definitions

1-B. Aggravating factor. "Aggravating factor" means any of the following circumstances with regard to the parent.

A. The parent has subjected any child for whom the parent was responsible to aggravated circumstances, including, but not limited to, the following:

(1) Rape, gross sexual misconduct, gross sexual assault, sexual abuse, incest, aggravated assault, kidnapping, promotion of prostitution, sexual exploitation of a minor, sex trafficking or aggravated sex trafficking, abandonment, torture, chronic abuse or any other treatment that is heinous or abhorrent to society. [PL 2015, c. 360, §3 (AMD).]

A-1. The parent refused for 6 months to comply with treatment required in a reunification plan with regard to the child. [PL 2001, c. 696, §11 (NEW).]

B. The parent has been convicted of any of the following crimes and the victim of the crime was a child for whom the parent was responsible or the victim was a child who was a member of a household lived in or frequented by the parent:

(1) Murder;

(2) Felony murder;

(3) Manslaughter;

(4) Aiding, conspiring or soliciting murder or manslaughter;

(5) Felony assault that results in serious bodily injury; or

(6) Any comparable crime in another jurisdiction. [PL 1997, c. 715, Pt. B, §1 (NEW).]

C. The parental rights of the parent to a sibling have been terminated involuntarily. [PL 1997, c. 715, Pt. B, §1 (NEW).]

D. The parent has abandoned the child. [PL 1997, c. 715, Pt. B, §1 (NEW).]

[PL 2015, c. 360, §3 (AMD).]

[Title 22, §4034: Request for a preliminary protection order \(mainelegislature.org\)](http://mainelegislature.org)

Title 22: HEALTH AND WELFARE
Subtitle 3: INCOME SUPPLEMENTATION
Part 3: CHILDREN
Chapter 1071: CHILD AND FAMILY SERVICES AND
CHILD PROTECTION ACT
Subchapter 4: PROTECTION ORDERS; PERMANENCY
GUARDIANSHIP

[§4034-A](#)

§4034. Request for a preliminary protection order

1. Request. A petitioner may add to a child protection petition a request for a preliminary protection order or may request a preliminary protection order separately from the child protection petition. A request for a preliminary protection order must include a sworn summary of facts to support the request and identify the specific services offered and provided under [section 4036-B, subsection 3](#) to prevent the removal of the child from the home.

[PL 2015, c. 501, §9 (AMD).]

§4036-B. Removal of child from home

1. Application. The provisions of this section apply in any case in which the court orders, or has ordered, the removal of a child from home.

[PL 2003, c. 408, §1 (NEW).]

2. Welfare of child. Before a court may order removal of a child from home, the court must specifically find that remaining in the home is contrary to the welfare of the child.

[PL 2003, c. 408, §1 (NEW).]

3. Reasonable efforts to prevent removal. The department shall make reasonable efforts to prevent removal of the child from home, unless the court finds the presence of an aggravating factor. In an order providing for removal of the child from home, or within 60 days of the date of removal of the child from home, the court shall make a finding:

A. Whether or not the department has made reasonable efforts to prevent the removal of the child from home; and [PL 2003, c. 408, §1 (NEW).]

B. If the court finds that the department did not make reasonable efforts to prevent the removal of the child from home, whether or not there is an aggravating factor. [PL 2003, c. 408, §1 (NEW).]

[PL 2003, c. 408, §1 (NEW).]

[Title 22, §4036-B: Removal of child from home \(mainelegislature.org\)](http://mainelegislature.org)

[Title 22, §4036-B: Removal of
child from home
\(mainelegislature.org\)](#)

4. Reasonable efforts to reunify. The department shall make reasonable efforts to rehabilitate and reunify the family as provided in [section 4041, subsection 1-A](#) unless the court has ordered that the department need not commence or may cease reunification pursuant to [section 4041, subsection 2](#). In the jeopardy order pursuant to [section 4035](#) and in each judicial review order pursuant to [section 4038](#), the court shall make a finding whether or not the department has made reasonable efforts to rehabilitate and reunify the family.

AUGUST 18, 2023 Letter to this Committee from Dr. Landry re Termination of Parental Rights (Maddox Williams case):

While the statute regarding termination ([22 MRSA §4052](#)) requires that TPR petitions be filed within specific timeframes, the department is not required to file the petition if the child is being cared for by a relative or the “department has documented to the Court a compelling reason for determining that filing such a petition would not be in the best interests of the child.”¹

Fn 1: Notably, the statute is silent as to the procedure through which this information is provided by the Department to the Court. As a practical matter, the Attorney General’s Office drafts and circulates proposed orders to the parties in an effort to solicit feedback and to come to an agreement to its terms. If the parties agree that the order encapsulates all of the requisite findings, the order is presented to the court for signing. Nothing compels the court to sign a proposed order, and judges often inquire after certain facts during judicial review and permanency planning hearings if they have questions. As part of this process, edits may be made at the hearing before the judge signs the order.