UNREPORTED

IN THE COURT OF SPECIAL APPEALS

OF MARYLAND

No. 0922

September Term, 2015

IN RE: ADOPTION/GUARDIANSHIP
OF Z. J. AND M. M.

Krauser, C.J.,
Hotten,
Berger,

JJ.

Opinion by Krauser, C.J.

Filed: November 16, 2015

Ms. K. appeals from an order of the Circuit Court for Baltimore City, sitting as a juvenile court, terminating her parental rights to her daughter, Z., and her son, M.[1] Challenging that decision, she contends that the court erred in so ruling. We disagree and affirm.

Prior Juvenile Court Proceedings

The Baltimore City Department of Social Services' (the "Department") involvement with Ms. K. dates back to Ms. K.'s own childhood. During the time period that stretched from 1994, when Ms. K. was eight years old, to August of 2007, when she turned twenty-one,[2] she was placed by the Department in a number of different foster homes. In fact, when her daughter Z. was born in March of 2007, Ms. K. was still in foster care, and Z. was not Ms. K.'s first child.[3] Moreover, between the date of Z.'s birth and the Department's filing of the instant petition, Z. had been the subject of two prior Child In

[1] Out of respect for the privacy interests of the parties, we shall not refer to them by name.

[2] At that time, Ms. K.'s placement with the Department terminated by operation of law. *See* Md. Code (2006, Repl. Vol. 2013) § 3-804(b) of the Courts and Judicial Proceedings Article ("CJP") (stating that, if a juvenile court "obtains jurisdiction over a child, that jurisdiction continues in that case until the child reaches the age of 21 years, unless the court terminates the case").

[3] In addition to Z. and M., Ms. K. has at least one other child, a son named "K.," who was born in 2005 and who has been, since 2010, in the custody of his father. At the hearing that was held on the Department's petition to terminate Ms. K.'s parental rights as to Z. and M., Ms. K. testified that she also has another daughter, named "J." But she refused to say where J. was living.

Need of Assistance[4] ("CINA") petitions, filed by the Department on her behalf. The first was filed in May of 2008 but was dismissed, by the Department, a month later. The second was filed in December of that same year.

While that second CINA petition was pending, the court ordered Ms. K. to submit to an evaluation of her "parenting skills" at the Medical Services Division of the Circuit Court for Baltimore City. The social worker, who conducted that evaluation, later opined, in a written report dated August 13, 2009, that Ms. K. "demonstrated impulsivity" and personality traits of "paranoia" and "dependency," and recommended life skills training, parenting classes, and therapy.

In November of 2009, the juvenile court found Z. to be a CINA but allowed her to remain with Ms. K. as long as Ms. K. complied with an "order controlling conduct," which required her to "maintain appropriate and stable housing" and to "participate in therapy." Four months later, the court closed Z.'s second CINA case, finding that Ms. K. had obtained housing, participated in therapy, "completed parenting and counseling," and "provided appropriate care to" Z.

[4] A Child in Need of Assistance is a child who requires court intervention because the child "has been abused, has been neglected, has a developmental disability, or has a mental disorder [and] [t]he child's parents, guardian, or custodian are unable or unwilling to give proper care and attention to the child and the child's needs." CJP § 3-801(f).

The Petition to Terminate Ms. K.'s Parental Rights

A little more than two years after the birth of Z., in March of 2007, Ms. K. gave birth to M. in May of 2009.[5] Then, when M. was seven or eight months old, Ms. K. took M. to a hospital to see a pediatrician. M., who has Down Syndrome, was suffering from "viral and respiratory distress" and was "breathing food into his lungs." The pediatrician instructed Ms. K. to feed M. using a "g-tube," or gastrostomy tube, which is a feeding tube surgically inserted into the stomach.[6] Two years later, in November of 2012, the g-tube was removed; however, the opening where the g-tube was removed became "irritated," necessitating the replacement of the g-tube in December so that M.'s "abdomen wall" could heal.

Two months later, on February 18, 2013, Ms. K. brought M. back to the pediatrician because M. had not been eating and was losing weight. Ms. K. was "agitated and upset," and complained to the pediatrician that she could no longer care for M. because she (the pediatrician) had "broke him." After the pediatrician decided to once again remove the g-tube, Ms. K. put M. in the pediatrician's lap and left. When asked by the doctor whether "she was really going to just leave him there," Ms. K. responded "yes." The pediatrician then called the Department. When it became clear, however, that Ms. K. had not actually left the hospital, she was allowed to take M. home with her, after his g-tube was removed.

[5] Z. and M. have different fathers, neither of whom participated in the termination of parental rights proceedings.

[6] *See Stedman's Medical Dictionary* (2001) 328 (defining "gastrostomy" as "[s]urgical construction of a permanent opening from the external surface of the abdominal wall into the stomach, usually for inserting a feeding tube").

Later that month, Ms. K. called 911, stated to the dispatcher, "he's sick," and hung up. When police and paramedics arrived at Ms. K.'s home, they found "medical supplies on the front porch." Ms. K. then answered the door and pointed to M., who was suffering from diarrhea. Ms. K. refused to change M.'s soiled diaper and eventually stopped responding to the police officer's questions. She then accompanied the paramedics as they transported M. to a hospital. At the hospital, she met with a caseworker from the Department, who later described her as "acting irate" and "argumentative to the doctors," adding that Ms. K. accused the doctors of "breaking her child."

On February 28, 2013, as a result of this incident, the Department filed, in the circuit court, a petition alleging that both Z. and M. were CINA, based on its belief that M.'s medical needs were not being met. The next day, the court, finding that Ms. K. had "provided inadequate health care" to M. and had "possible mental health issues," ordered that both Z. and M. be placed in shelter care. In taking that action, the court further explained that it "did not trust [Ms. K.]'s judgment for [her] older child," Z.

Nine months later, on November 22, 2013, the court found Z. and M. to be CINA. A year after that, on November 13, 2014, the Department filed a petition seeking to terminate Ms. K.'s parental rights to Z. and M. Ms. K. opposed the petition and counsel for the children objected, at least initially, to the termination of Ms. K.'s parental rights. But, at the conclusion of a two-day hearing on the Department's petition, counsel for the children withdrew the objection and consented to the termination of Ms. K.'s parental rights, on the condition that the children be adopted by their foster mother, Ms. H.

Services Offered by the Department to Ms. K.

At the TPR hearing, the Department presented testimony regarding the services it had offered to Ms. K. in an effort to reunite her with her children. Much of that testimony was provided by Sheila Harris, the case manager assigned to this matter from February of 2013 until August of 2014. Over one hundred exhibits were also entered into evidence for the court's consideration. Many of those exhibits were "Detailed Contact Reports," prepared by Ms. Harris, documenting the Department's interactions with Ms. K.

Ms. Harris testified that the Department offered Ms. K. a service agreement on March 22, 2013 (less than a month after the children were placed in shelter care), and again on May 6th of that year. Under the terms of that agreement, Ms. K. would "seek and participate in mental health treatment and provide documentation" of her participation, and the Department would refer Ms. K. to a mental health treatment clinic, monitor her progress in treatment, and provide her with "bus tokens" so she could attend treatment and visit with her children. Not only did Ms. K. refuse to sign this agreement on both occasions, but she informed Ms. Harris, on May 6th, that she was "not interested in developing [an] agreement nor [in] any services that [the Department] has to offer." The Department offered a second service agreement on September 9, 2013, which Ms. K. again declined to sign.

Despite Ms. K.'s refusal to sign these service agreements, Ms. Harris offered Ms. K. referrals for mental health treatment "at least five or six times" and suggested several different facilities. All of these referrals were rejected by Ms. K., who repeatedly insisted that she did not need mental health treatment. In spite of Ms. K.'s refusals to participate in any mental health program, Ms. Harris, in February of 2014, offered, by e-mail, to

accompany Ms. K. to an "intake appointment" at one of the mental health treatment programs she had recommended to Ms. K., explaining that treatment was important "for continued planning for reunification with [her] children." Ms. K. did not respond to this e-mail, but she did tell Ms. Harris that she had attended an "assessment for mental health treatment" but had not attended the treatment sessions that followed.

Ms. Harris also offered Ms. K. referrals for parenting classes, which she testified was "a normal procedure" when children are removed from a parent's care. Ms. Harris recommended parenting classes "at least twice," but Ms. K. refused those referrals and never provided documentation that she had completed a parenting class.

On November 5, 2013 (shortly before Z. and M. were found to be CINA), Ms. K. was evicted from her residence. According to an e-mail from Ms. K.'s landlord to Ms. Harris, which was admitted into evidence at the TPR hearing, the landlord believed Ms. K. was "unsafe" and "unstable," and gave as examples Ms. K.'s tampering with the wires of several water heaters, use of shoestring to tie the circuit breaker shut, refusal to turn on heat or air conditioning, and frequent complaints of ghosts. After offering Ms. K. assistance in finding new housing, Ms. Harris gave her a list of properties to contact. When Ms. K. eventually obtained new housing, the Department provided her with a check for $900 to cover the security deposit and another check for $521 to pay an outstanding Baltimore Gas and Electric bill.

Visitation History

Ms. Harris testified that Ms. K. was scheduled to visit with her children each week for one hour at one of the Department's offices in Baltimore City. The visitation was

supervised either by Ms. Harris herself or by one of her Department coworkers. Ms. K. was informed of the visitation schedule by telephone and by e-mail, and, when Ms. Harris had difficulty contacting Ms. K. by phone, she mailed a copy of the visitation schedule to Ms. K. and provided her with a copy of the schedule in person. And the Department, as noted, provided Ms. K. with "bus tokens," and eventually with a check to be used to purchase a bus pass, so she could attend these visits.

The Department asked Ms. K. to call on the day of her scheduled visit to confirm that she was coming and informed her that, if she did not confirm, her visit would be cancelled. Despite this instruction, Ms. K. usually did not contact the Department to confirm or cancel her visits. On at least two occasions, Ms. K. arrived for a visit she had not confirmed to find that her children had not been brought to the Department. On other occasions, the children were brought to the Department for visitation and waited for Ms. K., who then never arrived. Although visits were scheduled on a weekly basis, Ms. Harris testified that Ms. K. "was never consistent" and "maybe came once a month" to visit Z. and M.[7]

[7] Our review of the "Detailed Contact Reports" in the record, in which Ms. Harris recorded the visits that took place and the visits that were missed, reveals that Ms. K.'s visits were somewhat more consistent (at least in the beginning) than Ms. Harris's testimony suggested. In March of 2013, the month Z. and M. were placed in shelter care, Ms. K. attended two visits. She visited three to four times a month in April, June, July, and September of 2013, but visited only once in both May and August. Ms. K. attended two visits but missed three in October, and the record does not indicate any visits at all in either November or December. From January until mid-April of 2014, when the Department suspended visitation, Ms. K. attended only six visits.

During the visits she did attend, Ms. K. usually brought snacks or gifts for the children. She tended to spend much of the visitation time with Z., only interacting with M. for ten or fifteen minutes. She consistently refused to change M.'s diaper, insisting that that was the Department worker's job. Ms. K. twice attempted to communicate with the children and Department staff using a form of sign language, on one occasion arrived wearing a surgical "face mask," and on another brought homemade "playdoh" with her, explaining to the supervising Department worker that the "playdoh" was safe for the children to eat, since she had made it from flour, coffee, and mustard.

Ms. Harris further testified that at "almost every visit" Ms. K. would become "very loud," often yelling at her, at the other Department workers who supervised the visits, or at her children. That behavior frequently caused Z. to cry or "cringe" or "shrink" into herself. On at least three occasions, Department workers called security either to observe the remainder of the visit or to end the visit early.

Ms. Harris also indicated concern over the fact that Ms. K. undressed and examined the children, particularly Z., during several visits, whereupon she would express her belief that M. and Z. were not taking baths. Ms. Harris explained that she was not worried that Z. and M. were not taking baths and that the children were "always clean" and "appropriately dressed." Nonetheless, on three different occasions in 2013, Ms. K. removed Z.'s underwear and examined her vagina, despite the Department workers' requests that she not engage in that behavior. She also asked Department workers who were supervising the visits to smell Z.'s underarms or to look at Z.'s vagina.

Consequently, on November 22, 2013, the juvenile court ordered that Ms. K. was "not to examine" the children's bodies during her visits.[8] Ms. K. complied with the terms of that order for five of the six visits she attended from the entry of that order until April 10, 2014. On that date, Ms. K. arrived late for her scheduled visit and was, according to Ms. Harris's notes, "drinking liquid cornstarch from a box." She spoke negatively about the children's foster mother, "laughed" at Z.'s hair and clothing, and told Z. that "no one else loves her" other than Ms. K. Then, concerned that M. "did not smell clean," Ms. K. removed M.'s diaper and insisted that Z. look at his genitals. At that point, Ms. Harris informed Ms. K. that she was in violation of the juvenile court's order and ended the visit early.

After that April 10th visit, the Department notified Ms. K. that it was cancelling her visitation with Z. and M. until further notice. On June 6, 2014, the juvenile court entered an order suspending Ms. K.'s visitation with her children. Three months later, the court ordered that visits "shall remain suspended until [Ms. K.] successfully participates in mental health treatment." As Ms. K. never provided evidence to the Department or the juvenile court that she had participated in the required treatment, the order suspending visitation was never lifted. Consequently, at the time of the TPR hearing in April of 2015, Ms. K. had not seen Z. and M. in nearly a year.

[8] That order also provided that Ms. K. was not to discuss "the case, Ms. Harris," or the children's foster mother with Z. and M. during visitation.

Ms. K.'s Court-Ordered Evaluation

In October of 2013, eight months after Z. and M. were placed in shelter care, the juvenile court ordered that Ms. K. once again be evaluated by the court's Medical Services Division, this time to "determine any current diagnosis and [her] ability to parent her children." The same social worker, who had evaluated Ms. K. in 2009, conducted this second evaluation. Subsequently, in a written report dated November 12, 2013, the social worker opined that Ms. K.'s "psychological functioning" had "significantly deteriorated" since her 2009 evaluation, that Ms. K. was "not entirely cooperative" with the social worker, that Ms. K. stated that she did not know the reason for the evaluation, and that she refused to complete some of the testing and then left before the evaluation could be completed. Moreover, her responses to a sentence-completion exercise and a drawing exercise revealed what the report described as "delusional thinking." In light of the above, the social worker diagnosed Ms. K. with psychosis and with "traits of" paranoid personality disorder, narcissistic personality disorder, and dependency personality disorder.

The social worker further opined that Ms. K.'s "psychological functioning severely compromise[d] her ability to consistently adequately protect, supervise, and nurture [Z. and M.] at this time," and recommended that she "receive out-patient psychiatric treatment." Then, upon asserting that Ms. K.'s "disorganized and delusional thinking" was "consistent with her reported erratic and bizarre behaviors during visits with her children," the social worker recommended—seven months before the juvenile court entered an order to similar effect—that visitation with Z. and M. "be interrupted until such time as Ms. K. gains emotional stability through psychiatric treatment."

The Children's Adjustment to Their Foster Care Placement

When the children were removed from Ms. K's care in February of 2013, Z. was five years old and M. was three years old. At the time of the April 2015 TPR hearing, Z. and M. had been in the same foster care placement with Ms. H., a licensed foster-care provider, for nearly two years.[9] Both children have special needs: M. has Down Syndrome and asthma, and Z. has been diagnosed with an anxiety disorder, post-traumatic stress disorder, attention-deficit/hyperactivity disorder, and early onset puberty. Since the children have been in her care, Ms. H. has addressed those needs by ensuring that the children take their prescribed medications, seeing to it that they regularly visit a doctor, and attending weekly therapy sessions with Z. Both children, moreover, have individualized education programs and have been making progress in school.

Both Ms. Harris and the social worker, who monitored M. and Z.'s placement in Ms. H.'s home, testified that the children appeared to be "well adjusted" to the placement and had "bonded" with Ms. H., as well as with Ms. H.'s adult children and the rest of her family. Ms. H. also testified that she had "grown very attached" to Z. and M. and wished to adopt them. She further stated that, if the children requested it, she would allow them to have contact with Ms. K. Counsel for the children proffered to the court, at the beginning of the TPR hearing, that, while M. did not have "considered judgment" and had expressed no opinion regarding adoption, Z. wished to be adopted by Ms. H. but also wanted to have "a relationship with her mother in terms of visitation."

[9] The record does not provide the precise date that Z. and M. were placed in Ms. H.'s home.

Ms. K.'s Participation in the TPR Hearing

During the TPR hearing, although Ms. K. did not formally request that she be permitted to discharge her counsel, she told the court that she thought her attorney was not "doing a good enough job" representing her and expressed her wish to "co-represent [herself] along with an attorney." She explained that, as a "former foster youth," she had "more [than] enough experience" with the Department to represent herself. The court agreed to treat Ms. K. and her attorney "as co-counsel" for the remainder of the hearing and allowed Ms. K. to cross-examine the Department's witnesses, as well as give her own closing statement.

But, during the proceedings, the court frequently had to remind Ms. K. not to interrupt the witnesses or counsel. At other times, both while cross-examining witnesses and while on the witness stand herself, Ms. K. spoke in long narratives, usually about her own history as a foster child and her experiences with the Department. Referring to herself as "Jesus" and as "God," Ms. K. asked Ms. Harris, on cross-examination, how she felt "about the Lord" and if she could "admit to the fact of [Ms. K.] being Jesus."

Ms. K. testified that she was not given the opportunity to see her children on a regular basis and that the Department kept changing the visitation schedule. She described Z. and M. as having "overgrown fingernails" and "chopped off hair" when she saw them for visits, despite her instructions to the Department that neither Z. nor M. should have their hair cut. When asked about whether she had participated in parenting classes, she said she had completed a "life skills" course, some time before she left the foster care system in 2007, but did not provide any corroborating documentation. Similarly, when

questioned about whether she had sought mental health treatment, she responded that she had "already gone through mental health treatment" but refused to say when that treatment occurred or how many sessions of treatment she attended.

Ms. K. explained that she "love[d her] children dearly" and that her family was "everything" to her. She asked the court to deny the Department's petition and allow her children to live with her.

The Juvenile Court's Order

On May 14, 2015, in a written opinion and order, the juvenile court granted the Department's petition and terminated Ms. K.'s parental rights to Z. and M. In so doing, the court considered, as it was required to do, the factors listed in Maryland Code (1984, 2012 Repl. Vol.) § 5-323(d) of the Family Law Article ("F.L.") and made specific findings as to each factor it considered relevant.

The court found that, before Z. and M. were removed from Ms. K.'s care in February of 2013, the Department had worked with Ms. K. and offered her "comprehensive" and "appropriate" services, including assistance in obtaining housing, referrals for parenting classes and therapy, and an evaluation in 2009 by the circuit court's Medical Services Division. *See* F.L. § 5-323(d)(1)(i). Then, turning to the "extent, nature, and timeliness of services" offered by the Department to "facilitate reunion of the [children] and parent" once Z. and M. had been placed in Department's care, *see* F.L. § 5-323(d)(1)(ii), the court found that the Department had offered service agreements to Ms. K., referred her once again to parenting classes and mental health treatment programs, provided financial assistance for housing and transportation, and facilitated weekly visitation with her

children. Those services were offered notwithstanding Ms. K.'s refusal to sign the service agreements prepared by the Department. *See* F.L. § 5-323(d)(1)(iii). The court further found that there was "no evidence" that Ms. K. had "followed up on any of the referrals made by the Department," particularly the referrals for mental health treatment.

As for the "extent to which" Ms. K. had "maintained regular contact" with her children and with the Department, *see* F.L. § 5-323(d)(2)(i)(1–2), the court found that Ms. K. had not consistently attended the scheduled weekly visits with Z. and M., and, consequently, "the contact between the children and their mother ha[d] been irregular." In fact, the court found that the last contact between Ms. K. and her children had been "almost 10 months prior to the trial in this matter." Ms. K's contact with the Department, the court noted, "followed a similar pattern" of inconsistency, in that she had reached out to the Department for financial assistance but had not provided the Department with confirmation of her participation in any of the programs it suggested.

Although the court did not go so far as to find that Ms. K. had a "parental disability" that made her "consistently unable to care for the [children's] immediate and ongoing physical or psychological needs for long periods of time," *see* F.L. § 5-323(d)(2)(iii), it did find that Ms. K. had "traits of a paranoid personality disorder, a dependency personality disorder, and a narcissistic personality disorder," along with a "unique religious outlook." Then, finding that the "combination of the personality disorders and the religious preoccupation" prevented Ms. K. from "accessing housing, medical, educational, and therapeutic services" for her children; that her "insight and judgment [were] poor and interfere[d] with her ability to parent her children appropriately"; and that she was "neither

interested [n]or willing to engage in the long-term therapeutic services which are required to address her personality disorder traits," the court concluded that additional services would not be likely to bring about a lasting parental adjustment. *See* F.L. § 5-323(d)(2)(iv).

The court further found that there was "clear evidence" that Ms. K. had medically neglected both Z. and M. *See* F.L. § 5-323(d)(3). Though it made no finding of sexual abuse, the court stated that it was "very concerned about Ms. K.'s preoccupation with the sexuality of her children," and, finally, it concluded that she would not be able to protect Z. and M. "from inappropriate persons and circumstances."

Then, turning to the factors regarding the children's adjustment to their foster care placement and their feelings, if any, about the termination of Ms. K.'s parental rights, *see* F.L. § 5-323(d)(4)(i–iv), the court declared that Z. and M. had positive relationships with their foster mother, Ms. H., and with Ms. H.'s extended family. It next observed that both children had adjusted well to their community, home, and school, and their ongoing health and therapeutic needs were being met by Ms. H. It further noted that, while M. lacked "considered judgment" and had expressed no feelings regarding the termination of his mother's parental rights, Z. "view[ed] her current placement as her home and wishe[d] to remain there."

After examining the relevant statutory factors, the court concluded that Ms. K. was "emotionally unfit" to parent Z. and M., "based on her unmet mental health needs," and that "exceptional circumstances" existed that made a continued parental relationship between Ms. K. and the children detrimental to Z. and M.'s emotional wellbeing and best interests. In making the latter finding, the court focused on Z. and M.'s "unique needs,"

including Z.'s ongoing therapy for post-traumatic stress disorder and M.'s Down Syndrome, which were met in "a timely and appropriate fashion" by Ms. H. The court believed that Ms. K. would be unable to meet those same needs.

The court acknowledged, however, Ms. K's "genuine love and concern for each of her children." But that love and concern, the court opined, "lack[ed] the intensity to motivate [Ms. K.] to make personal changes that would allow her to appropriately care" for Z. and M. In fact, the court was "convinced that Ms. K. [was] neither interested nor willing" to address her lack of parenting skills and her need for mental health treatment, which were the "fundamental, root causes" of Z. and M.'s placement in foster care.

The court concluded its analysis by finding "by clear and convincing evidence" that it was in Z. and M.'s best interests to grant the Department's petition to terminate Ms. K.'s parental rights.

Discussion

In reviewing a juvenile court's decision with regard to the termination of parental rights, we employ three "interrelated standards" of review. *In re Adoption of Jayden G.*, 433 Md. 50, 96 (2013). We review the court's factual findings for clear error, its legal conclusions de novo, and its "ultimate conclusion" for abuse of discretion. *Id.* An abuse of discretion occurs when the court acts "without reference to any guiding rules or principles," or when its decision is "well removed from any center mark imagined by the reviewing court and beyond the fringe of what that court deems minimally acceptable." *In re Yve S.*, 373 Md. 551, 583–84 (2003).

The United States Supreme Court has declared that parents have a "fundamental liberty interest . . . in the care, custody, and management of their child." *Santosky v. Kramer*, 455 U.S. 745, 753 (1982); *see also In re Victoria C.*, 437 Md. 567, 589 (2014). The termination of that "fundamental and constitutional" right "is a 'drastic' measure, and should only be taken with great caution." *In re Adoption/Guardianship Nos. J9610436 & J9711031*, 368 Md. 666, 699 (2002). But a parent's right to raise his or her children is not absolute and "must be balanced against the fundamental right and responsibility of the State to protect children, who cannot protect themselves, from abuse and neglect." *In re Adoption/Guardianship of Rashawn H.*, 402 Md. 477, 497 (2007).

In determining whether to terminate parental rights, the "transcendent standard" is the best interest of the child. *In re Adoption/Guardianship of Ta'Niya C.*, 417 Md. 90, 112 (2010). Although it is presumed "that it is in the best interest of children to remain in the care and custody of their parents," that presumption "may be rebutted upon a showing," by clear and convincing evidence, "that the parent is either unfit or that exceptional circumstances exist that would make the continued [parental] relationship detrimental to the child's best interest." *Rashawn H.*, 402 Md. at 495, 498.

Section 5-323(d) of the Family Law Article sets forth an extensive list of factors that a juvenile court is required to consider in deciding whether to terminate parental rights. Those factors "serve both as the basis for a court's finding (1) whether there are exceptional circumstances that would make a continued parental relationship detrimental to the child's best interest, and (2) whether termination of parental rights is in the child's best interest." *Ta'Niya C.*, 417 Md. at 116 (quoting *Rashawn H.*, 402 Md. at 499). They include:

(1)(i) all services offered to the parent before the child's placement, whether offered by a local department, another agency, or a professional;

(ii) the extent, nature, and timeliness of services offered by a local department to facilitate reunion of the child and parent; and

(iii) the extent to which a local department and parent have fulfilled their obligations under a social services agreement, if any;

(2) the results of the parent's effort to adjust the parent's circumstances, condition, or conduct to make it in the child's best interests for the child to be returned to the parent's home, including:

(i) the extent to which the parent has maintained regular contact with:

1. the child;

2. the local department to which the child is committed; and

3. if feasible, the child's caregiver;

(ii) the parent's contribution to a reasonable part of the child's care and support, if the parent is financially able to do so;

(iii) the existence of a parental disability that makes the parent consistently unable to care for the child's immediate and ongoing physical or psychological needs for long periods of time; and

(iv) whether additional services would be likely to bring about a lasting parental adjustment so that the child could be returned to the parent within an ascertainable time not to exceed 18 months from the date of placement unless the juvenile court makes a specific finding that it is in the child's best interests to extend the time for a specified period;

(3) whether (i) the parent has abused or neglected the child or a minor and the seriousness of the abuse or neglect

* * *

(4) (i) the child's emotional ties with and feelings toward the child's parents, the child's siblings, and others who may affect the child's best interests significantly;

(ii) the child's adjustment to:

1. community;

2. home;

3. placement; and

4. school;

(iii) the child's feelings about severance of the parent-child relationship; and

(iv) the likely impact of terminating parental rights on the child's well-being.

Ms. K. does not dispute that the juvenile court considered these statutory factors, and it is clear from the court's comprehensive written opinion that it did, as reflected by the factual findings it made as to each factor that was relevant. Ms. K. challenges instead the court's determinations that she was unfit to parent Z. and M., and that exceptional circumstances existed that made the continuation of the parent-child relationship detrimental to Z. and M.'s best interests. She maintains that there was evidence presented to the court that she loved her children and did not want them to be raised in foster care, as she had been. She further contends that there was insufficient evidence that she was unfit to maintain an ongoing legal relationship with her children.

In order to terminate Ms. K.'s parental rights, the juvenile court was only required to find **either** that Ms. K. was unfit **or** that exceptional circumstances existed that made a continuation of the parental relationship detrimental to Z. and M.'s best interests. *See, e.g.*, *Rashawn H.*, 402 Md. at 501. Here, however, the court found the existence of **both:** unfitness and exceptional circumstances. And there was, as the record discloses, ample evidence to support both of the court's determinations.

First, it was clear that the Department made significant efforts to work with Ms. K. in spite of her refusal to sign the service agreements it offered her. The Department attempted to help Ms. K. find housing after she was evicted, provided monetary assistance to Ms. K. for housing and transportation, scheduled weekly visitation with her children, and referred her on numerous occasions to parenting classes and mental health treatment. Ms. Harris went so far as to schedule an "intake" appointment for Ms. K. at a mental health treatment center and offered to accompany Ms. K. to that appointment, explaining that such

treatment was a necessary step in the process of reunification with her children. Ms. K., however, failed to take advantage of the majority of the services offered to her, especially those related to her mental health.

And, as the circuit court found, it was Ms. K.'s mental health that was the primary barrier to reunification with her children. In making that finding the court relied, in part, on the evaluation conducted in 2013 by the circuit court's Medical Services Division. That evaluation revealed that Ms. K.'s mental health had "significantly" declined between 2009 and 2013. Her thinking was described, by that evaluation, as "disorganized and delusional" and her actions as "erratic and bizarre," which could be "potentially threatening and frightening for [her] children." The evaluation diagnosed Ms. K. with psychosis and traits of paranoid, dependent, and narcissistic personality disorders, and recommended that she seek outpatient treatment to help her gain "emotional stability."

Despite this recommendation, the Department's persistent efforts to help Ms. K. obtain treatment and a court order suspending her visitation with her children until she had "successfully participate[d] in mental health treatment," Ms. K. never sought treatment for her mental health. Her continued assertions that she did not need mental health treatment, and her refusals of the Department's numerous referrals, resulted in the continued suspension of her visitation with her children. In fact, her failure to obtain court-ordered treatment meant that, by the time of the TPR hearing, Ms. K. had not seen Z. and M. for nearly a year.

Moreover, the evidence presented to the juvenile court showed that, even before her visitation was suspended, Ms. K.'s visitation with Z. and M. had been inconsistent. Despite

the Department's requests, Ms. K. failed to regularly confirm or cancel her scheduled visits. Consequently, there were times when the children would arrive for a visit that Ms. K. never attended or times when Ms. K. would arrive only to find that the children had not been transported to the Department. The frequency of Ms. K.'s attendance at visits also declined over time, and in the six months preceding the court's order suspending visitation, Ms. K. had only attended six visits. The visits that Ms. K. did attend were sometimes characterized by disruptive behavior, including yelling at her children or the observing Department workers, and undressing Z. in order to examine her vagina.

Furthermore, ample evidence was presented to the court showing that returning Z. and M. to Ms. K.'s care would be detrimental to their best interests and that it would be in their best interests to remain in the care of their foster mother. While the evidence showed that Ms. K. was unable and, at times, unwilling to attend to both children's unique medical, therapeutic, and educational needs, those needs were met in their foster home, and the children had bonded with their foster family. The "likelihood of stability and certainty for each child" was thus found to be "high" if Z. and M. remained in their foster placement but "very low" if they were to be returned to Ms. K.

In sum, there was clear and convincing evidence presented to the juvenile court that the continuation of a parental relationship between Ms. K. and Z. and M. was not in the children's best interests. The court properly considered the necessary statutory factors and explained how its factual findings, which were not clearly erroneous in light of the evidence presented to it, supported its conclusions that Ms. K. was emotionally unfit to parent and that exceptional circumstances existed that supported the termination of Ms. K.'s parental

rights. Accordingly, the court did not abuse its discretion in granting the Department's petition.

JUDGMENT OF THE CIRCUIT COURT FOR BALTIMORE CITY AFFIRMED. COSTS TO BE PAID BY APPELLANT.