

Circuit Court for Baltimore County  
Case No.: C-03-JV-24-000092

UNREPORTED  
IN THE APPELLATE COURT  
OF MARYLAND\*

No. 2161

September Term, 2025

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IN RE: K.S.

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Nazarian,  
Arthur,  
Sharer, J. Frederick  
(Senior Judge, Specially Assigned),

JJ.

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Opinion by Sharer, J.

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Filed: May 20, 2026

\*This is an unreported opinion. This opinion may not be cited as precedent within the rule of stare decisis. It may be cited for its persuasive value only if the citation conforms to Rule 1-104(a)(2)(B).

The Circuit Court for Baltimore County, sitting as a juvenile court, changed the permanency plan of K.S. (previously adjudicated a child in need of assistance), from reunification with parent to reunification with parent concurrent with custody and guardianship with a non-relative. Mother appeals the decision and presents the following question for our review:

Did the court err when it changed K.S.’s permanency plan to include custody and guardianship?

Finding no error or abuse of discretion, we shall affirm the judgment.

### **FACTUAL AND PROCEDURAL BACKGROUND**

The essential facts in this case are not in dispute and, therefore, we set forth only what is necessary to address the issue on appeal and to provide context to our discussion.

On January 22, 2024, the Baltimore County Department of Social Services (“DSS”) filed a petition with request for shelter care in the circuit court advising that then ten-year-old K.S. had been removed from his mother’s care three days earlier due to “concerns regarding his mother’s mental health and stability along with subjection to violence.” The petition related that DSS had initiated an investigation earlier that month after the police responded to T.T.’s residence for an alleged assault. T.T. (“Mother”) is K.S.’s mother. When the police arrived at her home, Mother told the officers that she is the genetically modified offspring of Queen Elizabeth and her friend, S.E. (who was also present), was her daughter. S.E., however, appeared to the officers to be about the same age as Mother. S.E. engaged in a “paranoid rant” and told the police that she and Mother were being stalked by multiple gangs. S.E. further told the police that the Baltimore

County Police Department and her ex-husband were conspiring to harm her and Mother, a story Mother corroborated. The police determined that Mother had been arrested earlier that month, on January 4, 2024, in North Carolina, where Mother, S.E., and K.S. had fled based on their belief that people were trying to kill them. Mother was arrested after brandishing a sawed-off shotgun and threatening to kill people at a Greyhound bus station. (The North Carolina charges were subsequently dismissed.)

On January 12, 2024, a DSS social worker met with K.S., who related that multiple people were trying to harm him and his family, but Mother seeks to protect them from such people by keeping a boiling pot of water on the stove to throw at them, a bat by the door, and knives around the house. K.S. also related that they had recently fled out-of-state because of concerns others would harm them, and Mother had a firearm with her, which the police took when she pulled it out. K.S. and E.G. (minor daughter of S.E.) advised the social worker that Mother and S.E. told them they (the children) are the future King and Queen and should not be living in America because people are trying to kill them to take their royalty.

When speaking with Mother and S.E. during this visit, the social worker noted that both women presented with paranoid delusions. They related that they had recently fled to North Carolina because they had learned of a plot to kill them on New Years. Mother also told the social worker that she is unable to take K.S. to the doctor because people in the medical system are also trying to harm them.

The court granted the request for shelter care. In an “Addendum: Request for Commitment” filed with the court on March 21, 2024, DSS informed the court that Mother

had been hospitalized pursuant to an emergency petition. The hospitalization occurred after the police, on February 18, 2024, responded to Mother’s residence after neighbors had reported banging on the walls. Police officers discovered three to five inches of water throughout Mother’s entire apartment, and the bathtub faucet was running and water was overflowing from the tub. Mother had disconnected the power and had banged so hard on the walls that wiring behind the drywall was exposed. Mother had turned the burners on the stove to “on,” allowing gas to flow throughout the apartment. The officers observed no food or clothing in the residence.

In yet another addendum, filed on May 24, 2024, DSS informed the court that Mother, who was then living in a motel in Cambridge, had informed the social worker that she receives her medical care through the Veterans Administration (“VA”). Mother failed to keep an appointment with the social worker on May 6 when she was supposed to bring documentation regarding her mental health treatment. Later in the month, after moving to a motel in Glen Burnie, Mother informed the social worker that she sees a doctor at the VA and felt it was unnecessary for her to sign a release giving DSS permission to speak with her doctor. Although the social worker reported that Mother had “made progress” and she could converse with the worker “without . . . having paranoid thoughts on a regular basis,” the social worker had been unable to verify Mother’s mental health treatment or speak to any of her providers.

Following a hearing that concluded in August 2024, the court found K.S. to be a child in need of assistance (“CINA”). The order reflects the reasons for the CINA determination: “Mother’s mental health and instability results in her [being] unable to take

care of [K.S.] and placing him in imminent harm.” Mother was granted “liberal,” but supervised, visitation with K.S. In addition, the court ordered Mother to cooperate with DSS by, among other things, signing a release of information form related to “medical, mental health, and substance abuse services and treatment[.]” Mother was also ordered to participate in mental health treatment and comply with any treatment recommendations.

Following a review hearing on January 16, 2025, the court issued an order approving a permanency plan of reunification with parent(s). The court also continued K.S.’s commitment to the custody of DSS, and granted Mother liberal and supervised visitation with K.S., at K.S.’s “discretion.” In addition, Mother was ordered, among other things, to “enroll and participate in consistent mental health treatment and comply with all treatment recommendations until successfully discharged” and to “sign release of information forms about [the] same[.]” Mother was also directed to “complete a comprehensive psychological evaluation and Fitness to Parent Evaluation[.]”<sup>1</sup>

In April 2025, Dr. LaFaye Marshall met with Mother to evaluate her “parental capacity and psychological functioning[.]” Dr. Marshall’s report, dated May 20, 2025, was filed with the court on November 13, 2025. The report included Dr. Marshall’s opinion that Mother “does not currently have Parental Capacity, but may gain parental capacity in the foreseeable future.”

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<sup>1</sup> Mother noted exceptions, objecting to the requirement that she complete the psychological and fitness to parent evaluations. Those exceptions were ultimately denied, and Mother’s appeal of that decision was later voluntarily dismissed.

A permanency plan review hearing, the first in this case, was held on November 13 and 14, 2025.<sup>2</sup> At the outset, the court admitted, over Mother’s objection, DSS’s report dated November 4, 2025, which noted that K.S. had “adjusted well to the structure and support” in his foster care placement. The report further related that, during this review period, Mother had maintained consistent contact with DSS and completed the psychological evaluation with Dr. Marshall. Mother, however, had not signed the release of information forms giving authorization for DSS to speak with her mental health providers. Mother informed DSS that she meets with her psychiatrist “every three months[.]” Mother engaged in supervised visitation with K.S. every Monday evening for one hour and every other Saturday for three hours, and there had been “no concerns reported” about the visitation during this review period. The report included DSS’s recommendation that the permanency plan be changed from a sole plan of reunification with parent(s) to reunification concurrent with custody and guardianship to a non-relative. The recommendation was based on “the fitness to parent evaluation and the length of time (19 months) that [K.S.] has been in foster care” and noted that K.S. “deserves to have stability and permanency.” DSS also recommended that Mother, among other things, consistently participate in mental health treatment and sign release of information forms regarding the same.

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<sup>2</sup> Although represented at the hearing by counsel, K.S.’s father was not present. The court was informed that the father, who had been diagnosed with lung and brain cancer, was then hospitalized and recovering from surgery and “his state is currently really critical.” Father is not a party to the appeal before this Court.

The court also admitted, over Mother’s objection, Dr. Marshall’s report. Mother objected to its admission on the ground that the doctor was not present and available for cross-examination. Although admitting the report, the court did inform the parties that it was “expecting” that the witness would be produced, either that day “or a different day.”<sup>3</sup>

Sheyontay Kimbrough, the DSS social worker who had prepared the November 2025 report, had been assigned this case in February 2025. She testified that Mother had informed DSS that she receives services for herself through the VA. She also engages in family therapy with K.S. approximately twice a month. Mother had completed parenting classes and participates in a “parenting class support group[.]” During the review period, Mother consistently visited K.S. (under supervision) at the Arundel Mills Mall. DSS conducted a home assessment and determined that Mother’s home could accommodate K.S. if he were to return to her care.

Ms. Kimbrough related that DSS continues to recommend supervised visitation because of concerns regarding Mother’s mental health. She further testified that, while DSS commends Mother for “doing well,” it would like her to “engage in mental health treatment” given that her mental health issues were the reasons K.S. was sheltered and subsequently deemed a CINA. Although Mother maintains consistent contact with DSS, she continues to refuse to sign the release of information forms which would allow DSS to contact her VA mental health providers. Ms. Kimbrough confirmed that Dr. Marshall had not recommended that Mother have unsupervised visits with K.S.

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<sup>3</sup> It does not appear that Dr. Marshall appeared during this permanency plan review hearing on either day of the two-day proceeding.

Ms. Kimbrough related that K.S. is doing well in his foster home placement and “has a close-knit relationship with his foster family.” With regard to DSS’s permanency plan recommendation, Ms. Kimbrough stated that, although it was recommending a concurrent plan, the “primary” plan would be reunification with parent.

Rhyanna Cleckley, a “behavior Counselor,” testified that she supervises the visits between Mother and K.S. She has been supervising the visits since April 2024, over one and one-half years at the time of the permanency plan review hearing. Ms. Cleckley described their interaction as “normal mother and son.” Based on her observations, Mother and K.S. love each other very much. She related that K.S. is “really excited” for the visits with Mother, and she has never observed any “behaviors” on Mother’s part that has caused her any concern. She agreed that Mother has been “appropriate in her parenting style towards K.S.” Based on her observations during the supervised visits, Ms. Cleckley testified that she had no “safety concerns” or concerns about Mother’s “judgment” or “parenting behavior” or “mental health behaviors[.]” But Ms. Cleckley admitted that she is “not privy to Mother’s psychiatric treatment or care” or “privy to the results of [her] recent parental fitness evaluation[.]”

Documentation on VA letterhead was submitted indicating that Mother had been seen in their mental health clinic in Baltimore on July 26, 2024, September 20, 2024, November 26, 2024, and December 20, 2024. A “progress note” dated September 20, 2024 was also entered into evidence, which indicated that, among other things, Mother was diagnosed (per a “Discharge Summary of 3/1/24”) with “[u]nspecified psychotic disorder” and chronic PTSD. A June 17, 2025 letter on VA letterhead from a staff psychiatrist stated

that Mother was seen that day “for medication management” and she is “prescribed olanzapine 10mg at bedtime.” DSS had not received any other records related to Mother’s mental health treatment through the VA.

Mother chose not to testify at the permanency plan review hearing.

Counsel for DSS asked the court to adopt its recommendations and change the permanency plan from sole reunification with parent to reunification with parent concurrent with custody and guardianship by a relative or non-relative. DSS pointed out that K.S. came to its attention and was adjudicated CINA because of Mother’s mental health issues and, although she had completed parenting classes and consistently visited K.S., she had repeatedly failed to comply with DSS’s requests for her signature on the release of information forms. Counsel noted that K.S. would soon turn twelve years old and had been in foster care for twenty-two months. DSS advocated for the “dual permanency plan” because K.S. “obviously has a bond with his mother” and “mother is doing some things well[,]” but an “alternative plan” is needed given the time that had elapsed in this case.

The court-appointed special advocate pointed out that most of the documentation Mother had submitted from the VA was from 2024 and the information contained therein was very limited. Accordingly, the advocate noted that DSS was unable to tailor services to address whatever “triggers” Mother’s psychotic or erratic behaviors, such as fleeing to North Carolina and significantly damaging her apartment.

Counsel for K.S. noted that he has a strong bond with his foster mother as well as with Mother. Counsel argued for maintaining the sole permanency plan of reunification

with parent, but he urged Mother “to comply fully with [DSS], and be more engaged with her mental health services, and sign those releases so that she can fully reunify with” K.S.

Mother’s counsel maintained that Mother had made “substantial progress’ in this case and urged the court to retain the sole plan of reunification. Moreover, she asked that K.S. be returned to Mother’s care “in her home under OPS, with the condition of her just maintaining and continuing her mental health services” and maintaining safe, habitable housing. Counsel noted that Mother’s visits with K.S. have gone well and that she now has an appropriate living situation. If the court were not inclined to return K.S. to Mother at this time, counsel asked for unsupervised visitation. Counsel acknowledged that Mother had not signed the release of information forms, but she argued that the progress notes and slips showing that she had kept appointments at the VA were sufficient. Counsel related that Mother is uncomfortable with giving DSS full access to her VA medical records.

The court then addressed the parties, stating:

[L]et me first talk about the good and let me then talk about the Court’s concerns in this matter. I am so very pleased with how [DSS] has facilitated the access and visitation with Mom under the circumstances. Having a consistent supervisor who obviously works very well with the Mother and with the Child and is obviously very positive on behalf of the Mother. I am very, very pleased.

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I’m also very pleased with [Mother’s] involvement with her child. It’s beautiful to hear about the bond and the good times that they have during the course of these visits and if there are funds available to extend them a bit, that would be a wonderful thing. I’m glad to hear that perhaps - - since I don’t really have any confirmation - - but perhaps [Mother] is in therapy herself. Which I will say I do not consider the family therapy to be therapy for her. I’m pleased that she remains in contact and in good standing with

the [DSS] worker in this matter. As we all know, there are many cases where the parents are not even in contact.

I'm so very sorry that the Father is not in a position to be involved at the level that [Mother] is at the present time. And best wishes and hopes for him to have a very positive outcome and recovery from . . . his physical illnesses at the present time.

So let's talk about the difficulties a little bit. I know every child wants to go home. Every child wishes that they had both of their parents. Every child wishes that they could live with both of their parents . . . . That is something that I think we all wish on behalf of every child.

In this case, we have an example of very, very serious and concerning mental illness, which cannot be ignored or downplayed.

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Now, if this were a situation of just some fixed delusions that really had no bearing on child care, such as believing that one is the genetically modified offspring of Queen Elizabeth and being genetically modified by Hopkins Hospital, I do understand that there are a number of folks who have fixed delusions that may or may not have any bearing on child care. There are many, many parents who suffer from various mental health illnesses. There are many parents who suffer from physical illnesses that may affect them personally and how they interact.

Here we have a situation, whether the charges were dropped or not, and I have no idea why these charges were dropped. I'm informed by folks that charges were dropped. I don't know why these charges were dropped. But it does remain that the charges stemming from January 4th were incidents that occurred when this child was present . . . . The incidents involved fleeing from this state for whatever reason, which appears it may possibly be a delusional reason why the child was removed from this state and involved a weapon, allegedly.

Now I understand these allegations have not been sustained in a court of law on the criminal side, but they're still the basis for why this child has come into care initially. So we have firearms involved, we have alleged threats involved, we have children present. Then, we have allegations that folks were keeping boiling water as a defense mechanism, knives as a defense mechanism, lack of medical care, apparently. And if that wasn't enough, in February of 2024, a residence where the gas was turned on and

gas is throughout the residence, the apartment. Now, I understand the child mercifully was not present for all of that.

These are not allegations that can be downplayed or ignored. I am very, very pleased that [Mother] has done well since then, apparently. It does not appear that anyone is aware of any other incidents and whatnot beyond these. However, as it stands right now, I have no past history, no background, no releases. I encourage [DSS] to maintain this very positive relationship on behalf of this child. And understanding that every child wants to go home, most respectfully, unless and until there's complete releases in this matter, that is not going to happen. Not on my watch.

While I appreciate that this child has considered judgment and this child wants to go home and this . . . [s]oon to be 12-year-old, this child although he is certainly of an age where he can describe what's happening or can call someone, if he has a phone, can call someone if things were to get out of hand, he is still a child. And this level of mental health concern is not something that a child of this age is capable of dealing with. I understand, as opposed to a baby or infant that can't talk and can't describe what's going on, you know, he's an older child. But he is still a child. And a child should not have to self-protect at this level with this level of mental health concerns.

I see [Mother] is raising her hand. I did not hear from [Mother] during the course of these proceedings and that's fine, but this Court will be moving forward on the information it does have. Please understand I'm giving [Mother] the benefit of the doubt and an opportunity - - and no guarantees, but I will not make any changes in this matter other than to move in the direction of permanency.

And quite frankly, I'm considering any number of options. But for the present time, this case will be kept before this Court. This Court denies the motion, too, for a finding [of] a lack of reasonable efforts. I think under the circumstances the efforts [made by DSS on behalf of Mother] have been extraordinary - - not only reasonable, but extraordinary.

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I will say this: I do recognize that [Mother] has a positive bond and positive relationship with her son despite the prior situations but I do not believe it is safe. I do not believe that there are methods to safely return this child home without anyone's evaluation of whatever information is contained in

whatever prior treatment and current treatment [Mother] is undergoing, if she is.

So at the present time, the Court still finds this child to be CINA. I will certainly order, at minimum, concurrent plans. And quite frankly, I'm considering the sole plan of custody and guardianship and no plan of reunification with Mother, concurrent plan of reunification with Father should he become in a position, but this situation has gone on for coming up on two years with no releases. Not on my watch.

So submit your proposed order. I will sleep on it and think about whether or not this will be a concurrent plan with Mother, because I can't imagine or fathom why it would take two years for releases. It would appear to the Court that the intent is firm and fixed that she will not sign releases, so I'm not sure what the point is of continuing with a concurrent plan. So I am considering a sole plan of custody and guardianship, no plan of reunification with Mother, but I will sleep on it and think about it, and you will receive my order when I've made that final decision.

Pursuant to a written order dated December 1, 2025, the court ordered that the permanency plan be changed to reunification with parent concurrent with placement with a non-relative for custody and guardianship. The court awarded Mother liberal and supervised visitation with K.S. Among other things, the court also ordered Mother to permit scheduled and unscheduled home visits and to “submit to a mental health evaluation and comply with any and all recommendations therefrom and sign a necessary release of information OR participate in mental health treatment and cooperate with any treatment recommendations and sign necessary releases of information for [DSS.]”

### **STANDARD OF REVIEW**

We apply the following “three distinct but interrelated standards of review” when reviewing CINA proceedings. *In re J.R.*, 246 Md. App. 707, 730 (quotation marks and citation omitted), *cert. denied*, 471 Md. 272 (2020).

[W]hen the appellate court scrutinizes factual findings, the clearly erroneous standard of Rule 8-131(c) applies. Second, if it appears that the court erred as to matters of law, further proceedings in the trial court will ordinarily be required unless the error is determined to be harmless. Finally, when the appellate court views the ultimate conclusion of the court founded upon sound legal principles and based upon factual findings that are not clearly erroneous, the court’s decision should be disturbed only if there has been a clear abuse of discretion.

*In re M.*, 251 Md. App. 86, 111 (2021) (quotation marks and citations omitted).

“[A]n abuse of discretion exists ‘where no reasonable person would take the view adopted by the [trial] court, or when the court acts without reference to any guiding rules or principles.’” *In re Andre J.*, 223 Md. App. 305, 323 (2015) (quoting *In re Yve S.*, 373 Md. 551, 583 (2003)) (brackets in original). Accordingly, an appellate court will not disturb a circuit court’s ultimate decision unless it is “well removed from any center mark imagined by the reviewing court and beyond the fringe of what the court deems minimally acceptable.” *In re Ashley S.*, 431 Md. 678, 704 (2013) (quotation marks and citation omitted).

## **DISCUSSION**

### **I. Legal Framework**

#### **A. Child Custody**

The Fourteenth Amendment to the United States Constitution guarantees parents the fundamental right “to raise their children as they see fit without undue interference by the State[.]” *In re O.P.*, 470 Md. 225, 234 (2020). That liberty interest is not absolute, however, as the best interest of the child is paramount. *See Boswell v. Boswell*, 352 Md.

204, 219 (1998) (“[T]he best interests of the child may take precedence over the parent’s liberty interest in the course of a custody, visitation, or adoption dispute.”).

Although Maryland courts presume that it is in “the best interest of the children to remain in the care and custody of their parents,” *In re M.*, 251 Md. App. at 114 (quoting *In re Adoption/Guardianship of Rashawn H.*, 402 Md. 477, 495 (2007)), that presumption may be rebutted by evidence of abuse or neglect.<sup>4</sup> See *In re Yve S.*, 373 Md. at 568-69. Parents’ rights to care for their children, however, do not “evaporate simply because they have not been model parents or have lost temporary custody of their child[ren] to the State.” *In re Adoption/Guardianship Nos. J9610436 and J9711031*, 368 Md. 666, 672 (2002) (quoting *Santosky v. Kramer*, 455 U.S. 745, 753 (1982)).

### **B. CINA Proceedings**

Because the State possesses the sovereign power of *parens patriae*, the State possesses the “authority to care for children . . . because they cannot care for themselves.” *In re B.C.*, 234 Md. App. 698, 715 (2017). Thus, a juvenile court may take action when the State proves by a preponderance of the evidence that “the child ‘requires court intervention because: (1) [t]he child has been abused, has been neglected, has a

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<sup>4</sup> “Neglect” is defined as

the leaving of a child unattended or other failure to give proper care and attention to a child . . . under circumstances that indicate: (i) [t]hat the child’s health or welfare is harmed or placed at substantial risk of harm; or (ii) [t]hat the child has suffered mental injury or been placed at substantial risk of mental injury.

Md. Code, Courts & Judicial Proceedings Article § 3-801(t)(1).

developmental disability, or has a mental disorder; and (2) [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.” *In re M.*, 251 Md. App. at 115 (quoting Md. Code, Courts & Judicial Proceedings Article (“CJP”) § 3-801(f)). In such instances, the court has the discretion to “commit the child to the custody of a parent, a relative, or another suitable individual; or commit the child to the custody of the local department of social services or the Department of Health and Mental Hygiene for placement in foster, kinship, group, or residential treatment care.” *In re Ashley S.*, 431 Md. at 685-86.

### **C. Permanency Plans and Placements**

When the juvenile court, pursuant to CINA proceedings, places a child outside of the family home, it ““must determine a permanency plan consistent with the child’s best interests.”” *In re M.*, 251 Md. App. at 115 (quoting *In re Andre J.*, 223 Md. App. at 320). The permanency plan is intended to focus ““the direction in which the parent, agencies, and the court will work in terms of reaching a satisfactory conclusion to the situation.”” *In re Joseph N.*, 407 Md. 278, 285 (2009) (quoting *In re Yve S.*, 373 Md. at 582). The presumptive goal is the reunification of a child with his or her natural parents. *See In re Karl H.*, 394 Md. 402, 417 (2006) (“The court’s goal should be, if possible, to reunite a child with its family.”). “In situations, however, where reunification may not be possible, a permanency plan with either concurrent or single long-term placement goals may be considered[.]” *Id.* *See also* Md. Code, Family Law Article (“FL”) § 5-525(e)(1), (3) (“Reasonable efforts to place a child for adoption or with a legal guardian may be made concurrently with” the reasonable efforts required “to preserve and reunify families[.]”).

Pursuant to CJP § 3-823(e)(2), when reviewing a proposed permanency plan, the court must consider the factors set forth in FL § 5-525(f)(1). Those factors are:

- (i) the child’s ability to be safe and healthy in the home of the child’s parent;
- (ii) the child’s attachment and emotional ties to the child’s natural parents and siblings;
- (iii) the child’s emotional attachment to the child’s current caregiver and the caregiver’s family;
- (iv) the length of time the child has resided with the current caregiver;
- (v) the potential emotional, developmental, and educational harm to the child if moved from the child’s current placement; and
- (vi) the potential harm to the child by remaining in State custody for an excessive period of time.

FL § 5-525(f)(1).

Given the presumption that a child’s best interest is served by remaining in the care and custody of the natural parents, a permanency plan should focus on reunification “unless there are compelling circumstances to the contrary[.]” *In re Yve S.*, 373 Md. at 582. Accordingly, CJP § 3-823(e)(1)(i) sets forth the following hierarchy of placement options:

1. Reunification with the parent or guardian;
2. Placement with a relative for:
  - A. Adoption; or
  - B. Custody and guardianship . . . ;
3. Adoption by a nonrelative;
4. Custody and guardianship by a nonrelative[.]

“Once set initially, the goal of the permanency plan is re-visited periodically at hearings to determine progress and whether, due to historical and contemporary circumstances, that goal should be changed.” *In re Joseph N.*, 407 Md. at 285 (quoting

*In re Yve S.*, 373 Md. at 582). “The court shall conduct a hearing to review the permanency plan at least every 6 months[.]” CJP § 3-823(h)(1). At the review hearing, the court shall:

- (i) Determine the continuing necessity for and appropriateness of the commitment;
- (ii) Determine and document in its order whether reasonable efforts have been made to finalize the permanency plan that is in effect;
- (iii) Determine the appropriateness of and the extent of compliance with the case plan for the child;
- (iv) Determine the extent of progress that has been made toward alleviating or mitigating the causes necessitating commitment;
- (v) Project a reasonable date by which a child in placement may be returned home, placed in a preadoptive home, or placed under a legal guardianship;
- (vi) Evaluate the safety of the child and take necessary measures to protect the child;
- (vii) Change the permanency plan if a change in the permanency plan would be in the child’s best interest; and
- (viii) For a child with a developmental disability, direct the provision of services to obtain ongoing care, if any, needed after the court’s jurisdiction ends.

CJP § 3-823(h)(2).

“[I]f there are weighty circumstances indicting that reunification with the parent is not in the child’s best interest, the court should modify the permanency plan to a more appropriate arrangement.” *In re Adoption/Guardianship of Cadence B.*, 417 Md. 146, 157 (2010). When it is proposed that a newly determined plan be added concurrently with a previously determined sole permanency plan—as in this case—the court must, again, consider the factors in FL § 5-525(f)(1). *In re D.M.*, 250 Md. App. 541, 563 (2021).

Because remaining in the custody of DSS for an extended time is typically not in a child’s best interest, “[e]very reasonable effort shall be made to effectuate a permanent placement for the child within 24 months after the date of initial placement.” CJP § 3-

823(h)(5); *In re Adoption/Guardianship of Jayden G.*, 433 Md. 50, 84 (2013) (“The valid premise is that it is in a child’s best interest to be placed in a permanent home and to spend as little time as possible” in DSS’s custody. (cleaned up)).

## II. Contentions

Mother contends that the juvenile court erred in changing K.S.’s permanency plan from sole reunification with parent to reunification with parent concurrent with custody and guardianship with a non-relative. *First*, she asserts that the court “failed to make the necessary legal and factual findings to justify changing the permanency plan[.]” Specifically, she claims that the record does not reflect that the court “actually” considered the necessary statutory factors before changing the plan and “made no mention of K.S.’s best interest.”

*Second*, Mother maintains that the court abused its discretion in changing the permanency plan “because insufficient evidence reflected that formally adding custody and guardianship to a nonrelative was presently in K.S.’s best interests.” She notes that DSS had deemed her home to be appropriate if K.S. were to live with her and pointed to the positive testimony from Ms. Cleckley who supervised the visits between Mother and K.S. She asserts that “concerns about [Mother’s] ability to keep K.S. safe because of her past mental illness were rooted in the acknowledged past and speculation about her current and future circumstances.” She further maintains that the “court’s reason for changing K.S.’s plan was singular[.]” that is, based on the fact that Mother “had not allowed [DSS] to access her entire mental health record.” Mother also claims that DSS “provided no explanation for why a *court-ordered* plan change was even necessary at this stage,

especially when K.S. supported maintaining the plan of reunification and [Mother] and K.S. were progressing with family therapy and positive visits.”

DSS maintains that the court adequately addressed the requisite statutory factors when considering whether to change K.S.’s permanency plan. Acknowledging that the court did not specifically recite each factor, DSS asserts that the record reflects that the court did consider them. Moreover, DSS claims that the court “carefully weighed K.S.’s two years in care and his need for permanence against Mother’s consistent visitation but repeated failures to demonstrate resolution of her serious mental health issues.”

DSS also maintains that the court acted within its broad discretion when it added a concurrent plan of custody and guardianship. Noting that “[t]his case is about Mother’s serious mental health issues, and their harmful impact on K.S.[,]” DSS asserts that its focus on Mother’s mental health (and the request for medical releases) was necessary. Moreover, given that K.S. had been in foster care for nearly two years and Mother’s consistent refusal to sign the release of information forms, the court appropriately “add[ed] a concurrent plan” which “places [K.S.] a step closer to permanence.”

Counsel for K.S. filed a line with this Court stating that “Appellee-Child K.S. does have considered judg[.]ment[.]” and his “position is that the court did not err in changing [his] permanency plan to one of reunification concurrent with custody and guardianship.” Thus, K.S. requests that this Court affirm the judgment of the juvenile court.

### III. Analysis

#### A. The Juvenile Court Considered The Relevant Statutory Factors

We agree with Mother that, when considering a change to the K.S.’s permanency plans, the juvenile court was required to consider the statutory factors specified in FL § 5-525(f)(1) and make findings based on the evidence with respect to them. But as Mother herself acknowledges, the court need not recite certain words to demonstrate compliance with a statute. “The mere incantation of the magic words of a legal test, as an adherence to form over substance, is neither required nor desired if actual consideration of the necessary legal considerations are apparent in the record.” *In re D.M.*, 250 Md. App. at 563 (cleaned up).

Here, although the juvenile court did not highlight each statutory factor and then articulate specific findings relative to each, we are satisfied from the record that the court did consider them. Those factors, set forth in FL § 5-525, are:

- (i) the child’s ability to be safe and healthy in the home of the child’s parent;
- (ii) the child’s attachment and emotional ties to the child’s natural parents and siblings;
- (iii) the child’s emotional attachment to the child’s current caregiver and the caregiver’s family;
- (iv) the length of time the child has resided with the current caregiver;
- (v) the potential emotional, developmental, and educational harm to the child if moved from the child’s current placement; and
- (vi) the potential harm to the child by remaining in State custody for an excessive period of time.

FL § 5-525(f)(1).

The court in this case was particularly focused on the first factor, the ability of K.S. to be safe in Mother’s home, and rightly so given nature of Mother’s mental health crises

in January and February 2024. The court found that Mother’s “very, very serious and concerning mental illness” could not be “ignored or downplayed” and determined that it did not “believe that there are methods to safely return this child home without anyone’s evaluation of whatever information is contained in whatever prior treatment and current treatment [Mother] is undergoing, if she is” in treatment. The court recognized that some individuals with certain mental health issues can still parent effectively. But the issues that precipitated K.S. coming into care (Mother brandishing a weapon, keeping boiling water on the stove and knives around the home for protection) and later significantly damaging her home (allowing running water to accumulate inches deep and permitting gas from the stove to permeate the apartment) were things that could endanger a child.

The court also recognized and applauded the positive bond between Mother and K.S. and encouraged DSS to continue to foster that bond through liberal and supervised visitation. And the court heard about K.S.’s “close-knit” relationship with his foster family and had DSS’s report that he was thriving in that environment. The court noted that, if he were placed back in Mother’s care, given the uncertainty about her mental health status, it was conceivable that, if Mother had another episode, K.S. might need to “self-protect,” something a child his age should not have to do. And the court was certainly aware that K.S. had been in DSS’s custody for about twenty-two months.

In short, based on the record before us, we are persuaded that the juvenile court properly considered the factors set forth in FL § 5-525(f)(1) when determining whether to change K.S.’s permanency plan. It is also apparent that the court considered K.S.’s best interest in making its decision.

**B. The Juvenile Court Did Not Abuse Its Discretion In Changing The Permanency Plan To Include Custody & Guardianship**

We are not persuaded that the juvenile court abused its discretion in changing the permanency plan at this stage in the proceedings, that is, where about twenty-two months had elapsed since K.S. was initially removed from Mother’s home and Mother was, in the court’s view, “firm and fixed that she will not sign releases” that would enable DSS to assess her mental health status and how that might affect reunification. Moreover, the court did not forego reunification with parent, but merely added a concurrent plan of custody and guardianship by a non-relative. “‘Concurrent permanency planning’ means the process of taking concrete steps to implement *both* primary and secondary permanency plans[.]” COMAR 07.02.11.03B.(16) (emphasis added). In her testimony, Ms. Kimbrough stated that, although DSS was recommending a concurrent plan, the “primary” plan would be reunification.

DSS is tasked with making “[e]very reasonable effort . . . to effectuate a permanent placement for the child within 24 months after the date of initial placement.” CJP § 3-823(h)(5). We cannot say that adding a concurrent plan in this case at this time was so far removed from any center mark and beyond the fringe of what would be minimally acceptable. *See In re M.*, 251 Md. App. at 127 (observing that CINA proceedings are designed to be temporary because a child should have permanency in his or her life). Moreover, “[r]easonable efforts to place a child . . . with a legal guardian may be made

concurrently with” the reasonable efforts required “to preserve and reunify families[.]” FL § 5-525(e)(1), (3).

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