NEW MEXICO
CHILDREN, YOUTH AND
FAMILIES
DEPARTMENT
2015 – 2019
CHILD AND FAMILY
SERVICES PLAN
Chapter V: Consultation and Coordination Between State and Tribes

A. Input, Coordination and Collaboration From Tribes to Develop CFSP
   Description of Understanding of Responsibility to Provide Child Welfare to Tribal Children
   Ongoing Compliance with ICWA
   Discussions with Tribes Related to the CFSP

Chapter VI: Chafee Foster Care Independence Program (CFCIP)

A. Agency Administering CFCIP
B. Description of Program Design and Delivery

Chapter VII: Monthly Caseworker Visits

Chapter VIII: Adoption Incentive Program

Chapter IX: Child Welfare Waiver Demonstration

Chapter X: Target Case Plans

Chapter XI: Foster and Adoptive Parent Digilent Recruitment Plan

Chapter XII: Healthcare Oversight and Coordination Plan

Chapter XIII: Disaster Plan

Chapter XIV: Training Plan

Chapter XV: Financial Information
I. General information

A. State Agency Administering the Program

The Protective Services Division (PSD) is one of three service areas that make up the New Mexico Children, Youth and Families Department (CYFD), along with Early Childhood Services, Juvenile Justice Service and Behavioral Health Services.

CYFD Administrative Services supports all the service areas and includes Budget & Revenue, Financial Management, Employee Support Services, and Information Technology Services. The Office of the Cabinet Secretary includes the General Counsel’s Office, the Inspector General’s Office, the Constituent Affairs Director, the Native American Liaison, and the Director of Legislative and Community Affairs.

PSD is the state agency designated to administer the Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B subpart 1), the Promoting Safe and Stable Families (PSSF) Program (Title IV-B subpart 2), Child Abuse Prevention and Treatment Act (CAPTA & CBCAP), Title IV-E, the Chafee Foster Care Independence Program and Education and Training Voucher Program. As such, PSD is responsible for all child welfare services for children and families in New Mexico. The Division is mandated, in accordance with the New Mexico Children’s Code, NMSA 1978 Section 32A-4 et. seq., to receive and investigate reports of children in need of protection from abuse and neglect by their parent, guardian or custodian, and to take action to protect those children whose safety cannot be assured in the home. In addition, the Division is committed to assuring the well-being of the children in its care and to provide permanency for those children as quickly and as safely possible.

PSD provides child protective services and other child welfare services in every geographic area in the state. Administration of the child welfare program is centralized, with direct services offered through county offices located within five designated regions. County office managers report to five regional managers who, in turn, report to the field deputy director. The field deputy also manages the Statewide Central Intake. The program deputy director manages the Adoption and Foster Care Bureau, the Research and Data Analysis Bureau, the Youth Services Bureau, the Domestic Violence Unit, and the constituent ombudsperson and immigration liaison. The administrative deputy director manages administrative functions, including the Policy, Training and Federal Reporting Bureau, the Community Services Bureau, Fiscal/Budget, Human Resources and Administration. PSD has in-house children’s court attorneys, located throughout the state and managed by regional attorney managers under the chief children’s court attorney. An organizational chart for PSD is attached to this report.

New Mexico’s APSR, CFSP and CAPTA plans are posted on the CYFD website: http://cyfd.org/about-cyfd/publications-reports. The current contact is Brenda Manus (brenda.manus@state.nm.us, 505-827-8474 or 505-681-2472, Yvette Sandoval (Yvette.sandoval@state.nm.us, 505-827-8400) or Milissa Soto (milissa.soto@state.nm.us, 505-827-8078).
B. Vision and Mission Statement and Piñon Values and Principles

**Protective Services Division Vision Statement:** Children and youth in New Mexico live in a family environment free from abuse and neglect.

**Protective Services Division Mission Statement:** We serve children, youth and families by:
- Protecting children and youth from abuse and neglect;
- Pursuing timely permanency; and
- Promoting well-being.

**Piñon Values and Principles**

**Safety:** Child and youth safety is paramount. Managing safety begins with our first contact and continues through the life of the case. We assess safety threats, child and youth vulnerabilities, and protective capacities and develop safety plans based on these factors.

**Preserving Connections:** All children and youth will have enduring relationships that provide a family, stability, belonging and a sense of self that connects them to their past, present and future.

**Children and Youth Centered Practice:** Our practice is centered on the best interests, well-being and needs of each child and youth we serve. As age and developmentally appropriate, the child and youth’s views, thoughts, and ideas are expressed and taken into consideration in planning and service provision.

**Family Focused:** We recognize that all families have strengths and will have a voice in decisions about their children. We work with and support the entire family.

**Organizational Competence:** Children and families receive services from highly trained and skilled staff. Our staff will have a supportive, respectful and positive environment.

**Customer Service:** Customer service begins at the first point of contact and extends throughout all of our relationships. We are respectful, courteous, communicative and professional with each other, our children, youth and families, our community partners and the public. We engage our families, foster parents and others as part of the team planning and caring for our children and young people to achieve positive outcomes.

**Trustworthy & Accountable:** We are fair and compassionate and act with respect and integrity. We are transparent and responsive to our children, youth and families as well as our partners and communities, within the limits of confidentiality. We avoid personal bias and reach factually supported conclusions in a timely and thorough manner.

**Culturally Competent Practice:** We understand, respect and serve children, youth and families within the context of their own family rules, traditions, history and culture.

**Data Driven Decision Making:** We collect and use reliable and valid data to inform decision-making, to direct continuous quality and practice improvement and to evaluate our efforts in terms of safety, well-being, and permanency outcomes for children, youth and families.

**Evidence Informed Practice:** We use evidence-informed practices for effective service planning and service delivery for children, youth and their families.

**Shared Responsibility:** The entire community shares the responsibility of keeping children and youth safe and protecting them from abuse and neglect. Children and youth are best served when they are part of and supported by their community with services that are accessible and individualized. We recognize that community partnerships are essential to ensure child and youth safety, permanency and well-being.
C. Stakeholder Collaboration

PSD’s strategic planning is informed by the division’s extensive consultation and coordination process with different partners. PSD has a long-term and effective collaboration with numerous partners and stakeholders. This collaboration begins with our Piñon Project and continues with county level collaboration with local judicial systems and legal communities, foster parents, tribal partners, community providers and families. Utilizing continuous quality improvement principles, PSD conducted weekly stakeholder meetings in April and May 2014 to obtain feedback on strengths, challenges and to solicit ideas for improvement related to the seven outcomes and seven systemic factors. QA and SACWIS data was provided for each outcome and systemic factor which generated discussions around strengths and challenges and ideas for improvement which helped shape PSD’s CFSP and plan for improvement. PSD utilized feedback to further update policy and procedure, practices, strategic plan and development of our CFSP. In June 2014, PSD also began holding Data Roundtables to continue to collaborate with internal and external partners and continue to grow practices within PSD.

Piñon Project: PSD began working on the Piñon Project and Practice Model in 2009. The Piñon Project workgroup meets every other month and includes executive management, managers, supervisors and front line staff from across the state. In 2013, round one and round two counties began holding Piñon meetings that include managers and front line staff within a given region. Regionalized meetings occur every other month and follow the same format as the statewide Piñon Project meetings. As of April 2014, the Piñon Practice Model has been implemented in all counties. The primary focus for the Piñon Project will be full implementation, integration and sustainability. PSD continues to work with National Resource Center for Organizational Improvement (NRCOI) on this effort. PSD implements the Piñon Practice Model as a framework for collaboration with our internal and external partners. PSD began this process through development of workgroups to review and further develop PSD policy and procedure, aligning them with our Piñon values and principles. Workgroup members consisted of field staff, supervisors, County Office Managers, Central Office staff, foster parents and other external partners (i.e. biological parents, judicial, community providers) as appropriate. PSD completed this process with the following policy and procedures: General, Intake, Investigation, and In Home Services. Prior to the Piñon Project and Practice Model policy and procedures were developed by a small group of individuals consisting of Central Office staff. The Piñon model process allows for more inclusiveness and collaboration with internal and external stakeholders. As practices are developed to improve PSD and child welfare as a whole, workgroups are formed or Adaptive Leadership™ Office Hours are conducted. The Piñon Project and Practice Model and Adaptive Leadership Office Hours has allowed PSD to more transparent. PSD plans to use data and feedback to develop policy and procedures, practice, strategic plan and APSR over the next five years.

Adaptive Leadership™: PSD has utilized Adaptive Leadership™ as a primary tool of the Piñon Project. Adaptive Leadership™ is a leadership framework developed by Cambridge Leadership Associates (CLA) that assists systems in recognizing the difference between technical and adaptive challenges, and providing individuals different tools to work on adaptive challenges. Once such tool is Office Hours, which utilizes CLA’s Peer Consultation Model. Each county identifies an adaptive challenge, develops an “experiment” around their challenge, and tests and measures their “experiment” until a practice is developed that can be scaled out further within the county, region and state. If a practice is accepted statewide, that practice is then incorporated into policy and procedure. As of April 2014, every county in New Mexico is practicing Adaptive Leadership™ by looking at situations through a different “lens”. Adaptive Leadership™ has assisted PSD in being more inclusive with internal and external stakeholders. Each county office is using Office Hours to address adaptive challenges within their county and conducting experiments to test different practices to address the adaptive challenge. Each county reports out their results at the Piñon Project Workgroup meetings. One example of this process is several counties (i.e. Grant, San Miguel) conducted Office Hours on collaborating differently with external partners. Through the knowledge obtained, PSD implemented “teaming” statewide. Utilization of Adaptive Leadership™ and office hours has allowed improved statewide
consistency in certain practices as well as counties having the ability to build upon best practices developed in other counties.

**Courts and Court Improvement Project:** PSD is represented on the State’s Children’s Court Improvement Commission (CCIC) and many of the CCIC’s work groups, including the advisory groups for the CCIC training and data grants and new work groups on parent representation, education, and quality of representation and hearings. PSD initiatives which involve the court and court processes are discussed at CCIC meetings, and the division’s input is sought into CCIC initiatives. PSD has worked with the Children’s Law Center at the University of New Mexico School of Law, the sub-grantee on the CCIC training grant, and the New Mexico Administrative Office of the Courts (AOC) to use Title IV-E funds to support training for judges, attorneys, Court Appointed Special Advocate (CASA) volunteers, and court staff. PSD is represented on the Advisory Committee for the Children’s Law Center and is a sponsoring partner in the annual cross-training presented through the training grant. PSD, Children’s Law Center and AOC expanded Title IV-E support to offer training for judges and court-appointed attorneys, including training on maltreatment, trauma and the social and emotional well-being of children who have been abused or neglected.

PSD representatives participate on the Children’s Justice Act Advisory Group (CJAAG), which insures consultation and coordination in terms of the expenditure of Children’s Justice Act funds to support the investigation and prosecution of child abuse and services to mitigate the trauma to the child victim. Other CJAAG members include judges, attorneys, law enforcement, service providers and advocates.

**Tribal Collaboration:** PSD has been committed to working collaboratively with the 22 tribes located in New Mexico, as well as with those tribes whose members come into the care of the agency. PSD utilizes the CYFD Native American Liaison and different tribal and state meetings such as the Title IV-B Tribal meeting to further collaboration. Tribal input on the CFSP was obtained through the April and May 2014 stakeholder meetings and through the Title IV-B Tribal meeting that occurred in April 2014. Below is a list of tribal partners invited to the stakeholder meetings:

<table>
<thead>
<tr>
<th>Tribe or Pueblo</th>
<th>Tribe or Pueblo Representative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pueblo of Acoma</td>
<td>Governor Fred S. Vallo, Sr, Donalyn Sarracino, Sharon Young</td>
</tr>
<tr>
<td>Pueblo of Cochiti</td>
<td>Governor Joseph H. Suina</td>
</tr>
<tr>
<td>Pueblo of Isleta</td>
<td>Governor E. Paul Torres, Caroline Dartez</td>
</tr>
<tr>
<td>Pueblo of Jemez</td>
<td>Governor Joshua Madalena, Carla Sandia, Hennetta A. Gachupin</td>
</tr>
<tr>
<td>Pueblo of Laguna</td>
<td>Governor Richard B. Luarkie, Marie Alarid</td>
</tr>
<tr>
<td>Pueblo of Nambe</td>
<td>Governor Phillip A. Perez, Venus Mongofeds</td>
</tr>
<tr>
<td>Ohkay Owingeh</td>
<td>Governor Marcelino Aquino, Rodelle Thompson</td>
</tr>
<tr>
<td>Pueblo of Picuris</td>
<td>Governor Richard Mermojo</td>
</tr>
<tr>
<td>Pueblo of Pojoaque</td>
<td>Governor George Rivera</td>
</tr>
<tr>
<td>Pueblo of San Felipe</td>
<td>Governor Joseph E. Sandoval, Darlene J. Valencia</td>
</tr>
<tr>
<td>Pueblo of San Ildefonso</td>
<td>Governor Terry L. Aguilar, Sharon Serrano, Julie Sanchez</td>
</tr>
<tr>
<td>Pueblo of Sandia</td>
<td>Governor Stuart Paisano, Randall Berner, Kimberly Lorenzini</td>
</tr>
<tr>
<td>Pueblo of Santa Ana</td>
<td>Governor George M. Montoya, Nathan Tsosie</td>
</tr>
<tr>
<td>Pueblo of Santa Clara</td>
<td>Governor J. Michael Chavarria, Jacque Wright, Julie Bird, Terri Chavarria</td>
</tr>
<tr>
<td>Pueblo of Santo Domingo</td>
<td>Governor Oscar K. Lovato, Tori Garnat</td>
</tr>
<tr>
<td>Pueblo of Taos</td>
<td>Governor Clyde M. Romero, Ezra Bayles, Helena Concha</td>
</tr>
<tr>
<td>Pueblo of Tesuque</td>
<td>Governor Robert Mora, Sr., Jeannette Jagles</td>
</tr>
<tr>
<td>Pueblo of Zia</td>
<td>Governor David Pino, Victoria Herrera</td>
</tr>
</tbody>
</table>
PSD utilized the information to identify systemic factor strengths and challenges, and the identification of goals for the Plan for Improvement. Over the next five years, PSD plans to hold stakeholder meetings to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals.

PSD will share the CFSP with tribal partners through the Native American Liaison and tribal contacts – tribal governors or presidents. PSD will request a copy of each tribe or pueblos’ CFSP through their governor or president and through PSD Native American liaison.

**Youth:** PSD supports and is actively involved with Leaders Uniting Voices, Youth Advocates of New Mexico (LUVYA-NM), an organization of foster care youth and foster care alumni. Members of LUVYA-NM plan the annual Independent Living Conference, identifying topics for workshops and speakers, managing the budget, developing the theme, and the overall process of conference activities. Youth are also involved in planning and participating in the annual Children’s Law Institute. PSD collaborates with LUVYA-NM to improve outcomes for older children in care, focusing most recently on sibling rights, particularly in the areas of visitation and preserving connections post adoption.

**Foster and Adoptive Parents:** PSD works closely with foster and adoptive parents on an ongoing basis. A community “roundtable” is held at both the annual Foster Parent Conference and Adoptive Families Conference for families to inform foster and adoptive about the division’s initiatives and to obtain feedback. PSD actively supports the statewide and local Foster Parent Associations by inviting the group’s president to present at statewide county office manager meetings and other events, and by encouraging foster and adoptive parents to join these groups. PSD has also sought foster parent feedback on their experience with us through the Step Up! Diligent Recruitment grant surveys and through participation in different meetings with the division. The survey information has been utilized to develop customer service plans in the five Diligent Recruitment counties.

**Schools:**

- On December 6, 2012, the New Mexico Supreme Court ordered the establishment of a joint task force on education. The task force has submitted recommendations to the Governor, the Supreme Court Chief Justice, and the Secretaries of CYFD and the Public Education Department related to the challenges and barriers to address the educational needs of children and youth in the child welfare system. The task force will target specific educational outcomes that require improvement, identify and implement solutions, develop a cross training plan and implement a data system to be shared between child welfare, education and the judicial system.

- PSD participates and represents child welfare on the New Mexico State Advisory Panel – Individuals with Disabilities Education Act (IDEA) Part C.
• PSD has worked with the Public Education Department and the Department of Health Office of School Health to develop and disseminate an e-learning for school personnel on detecting and reporting child abuse and neglect.

Service Providers and Community Partners:
• Community PSSF providers across the state are contracted (through a competitive bid process) for Family Support, Family Preservation, Time-Limited Family Reunification, and Adoption Promotion and Support Services. Providers meet with PSD staff at least four times a year and participate in various trainings and other events on a regular basis.
• PSD initiated a workgroup to develop standards, policies and procedures related to the mental health of infants. The group is reviewing current policies and procedures specifically related to children age three and under and will make recommendations that address the needs of this population. This group will utilize the information obtained from two pilot projects in the state targeting infant mental health. These projects have developed teams in the community and courts that target infants and strategically work with parents to improve well-being and establish permanency for infants.
• PSD has collaborated with state and local law enforcement entities over the past several years to provide training in response to regulatory and practice changes. In the spring of 2013 an interdisciplinary forum was held on the use of multidisciplinary teams in all jurisdictions in the state. As a result of this forum many counties have started Multi-Disciplinary Teams, which will provide ongoing collaboration.

Public Input: As required by state regulation, a public hearing is held any time PSD proposes new policy for promulgation or for feedback on the Social Security Block Grant (SSBG) Title XX plan. The NM Citizen Review Board Project publishes an annual report which provides recommendations for systemic changes in the child welfare system. The PSD director’s response to the 2014 Annual Report is included as an attachment to the CAPTA Plan. The Office of the Secretary and PSD each maintain a constituency liaison whom address public concerns regarding the division or department. In addition, CYFD maintains a website, www.cyfd.org, which provides information about CYFD and its programs.

Other Forums: PSD county offices engage in local events in their areas, including multi-disciplinary teams, community-based child advocacy groups, foster and adoptive parent recruitment activities, Child Abuse Prevention Awareness Month activities and more. In addition, county office managers, statewide central intake staff and other PSD staff regularly provide training and other information to law enforcement, schools, and other groups regarding child abuse and neglect, mandatory reporting, and child welfare practice in New Mexico. There are other forums and opportunities which continue to be used for ongoing collaboration and cooperation, including the annual Children’s Law Institute, presentations at the annual Foster Parent Conference and the Adoptive Families Conference, the Interagency Coordinating Council for Early Intervention, the Children’s Cabinet and ongoing stakeholder meetings.
II. Child and Family Outcomes

PSD assess practice through regular comprehensive case review in order to obtain quantitative and qualitative data that can be used in conjunction with data from the state’s management information system, to accurately identify areas of practice strength and areas needing improvement.

Baselines for each safety, permanency and well-being outcome were obtained using QA data from calendar years 2013. Baselines for SACWIS measures were obtained using the average of the first three quarters of state fiscal year 2014. All targets were calculated using a “bootstrapping” technique based on guidance outlined in the April 23, 2014 Federal Register Notice of Statewide Data Indicators and National Standards for Child and Family Services Review (FR Doc. 2014-09001). PSD used QA data from calendar years 2011, 2012 and 2013 to calculate the mean and standard deviation. PSD used SACWIS data from state fiscal years 2012, 2013 and 2014 to calculate the mean and standard deviation. Targets were then calculated using the recommended four standard deviations above the mean. New Mexico’s 2015 – 2019 Child and Family Services Plan set targets specifically for June 2019 of the Plan. PSD targets for each year as well as the five year period could be impacted by the CFSR items being reviewed differently. Any impact will be reported out in the first APSR.

Strengths and challenges identified below are based on QA data, data from the PSD quarterly performance measure (SACWIS data) and stakeholder input.

A. Safety Outcomes 1 and 2

<table>
<thead>
<tr>
<th>Objective</th>
<th>Baseline</th>
<th>2019 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Safety Outcome 1 (S1): Children are, first and foremost, protected from abuse and neglect.</strong></td>
<td>67.3%</td>
<td>85.8%</td>
</tr>
<tr>
<td>By June 30, 2019, at least 85.8% of cases reviewed will be rated as “substantially achieved” on Safety Outcome 1 of the CFSR-OSRI.</td>
<td>67.3%</td>
<td>85.8%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>S1 (Item 1): Timely response to incoming reports of child maltreatment</strong></td>
<td>84%</td>
<td>96.8%</td>
</tr>
<tr>
<td>By June 30, 2019, at least 96.8% of cases reviewed will be rated as a “substantially achieved” on Item 1 of the CFSR-OSRI.</td>
<td>84%</td>
<td>96.8%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>S1 (Item 2): Reduced recurrence of child maltreatment</strong></td>
<td>89%</td>
<td>93%</td>
</tr>
<tr>
<td>Children will not be subject to a substantiated maltreatment report within 6 months of prior substantiated maltreatment.</td>
<td>89%</td>
<td>93%</td>
</tr>
<tr>
<td>Source: SACWIS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children will not be subject to substantiated maltreatment in foster care.</td>
<td>99.8%</td>
<td>100%</td>
</tr>
<tr>
<td>Source: SACWIS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 92.1% of cases reviewed will be rated as a “substantially achieved” on Item 2 of the CFSR-OSRI.</td>
<td>68.5%</td>
<td>92.1%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Safety Outcome 2 (S2): Children are safely maintained in their own homes whenever possible and appropriate.</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
By June 30, 2019, at least 75.4% of cases reviewed will be rated as “substantially achieved” on Safety Outcome 2 of the CFSR-OSRI. 
Source: PSD QA Data

<table>
<thead>
<tr>
<th>S2 (Item 3): Services to family to protect child(ren) in the home and prevent removal and re-entry.</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 98.6% of cases reviewed will be rated as “substantially achieved” on Item 3 of the CFSR-OSRI.</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>S2 (Item 4): Risk assessment and safety management.</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 83.1% of cases reviewed will be rated as “substantially achieved” on Item 4 of the CFSR-OSRI.</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
</tr>
</tbody>
</table>

Safety Outcome 1 and 2 Strengths:
1. The percent of children in foster care who are not the subject of substantiated maltreatment while in foster care was above the established target for SFY 2013 and 2014.
2. Initial assessment of safety and risk is a strength in investigations and in-home service cases and there have been steady improvements in staff utilization of the formal risk and safety assessment tools.

Safety Outcome 1 and 2 Challenges:
1. When investigations are late, it typically is a priority two reports are not initiated with face to face contact with the named victims in accordance with the timeframes required by PSD policy and procedure. The investigation worker has five calendar days to initiate the investigation and in many instances, in which face to face contact is late, the worker did not begin efforts until three or more days after assignment of the investigation.
2. Statewide there is limited and inconsistent practice around staffing cases with the supervisor or manager when there are barriers to initiation of an investigation. In many of the late initiations, there is no evidence in the case record or through report by the worker that there was supervisory oversight or direction to strategize around initiation. Although, some counties have implemented a pre-initiation strategy as of challenge.
3. Statewide there is inconsistent documentation in the FACTS record that clearly specifies the date and time of face to contact with all of the named victims in a report.
4. The percent of children subject to repeat maltreatment has been trending upward since SFY 2012.
5. Statewide, there is a limited and inconsistent service array specifically to address safety threats impacting families, in particular services related to substance abuse, domestic violence, mental illness, poverty and homelessness. In some communities there is a lack of services or long waiting lists for service delivery. This feedback was also provided by stakeholders in community meetings.
6. Although identification of safety threats is often accurate, adequate safety planning continues to be a challenge. Safety plans, in which children remain in the home, often do not adequately control or manage safety threats, instead rely on parental promise. In addition, the use of safety monitors as part of safety planning is inconsistent and frequently cannot be linked to enhanced safety management.
## B. Permanency Outcomes 1 and 2

<table>
<thead>
<tr>
<th>Objective</th>
<th>Baseline</th>
<th>2019 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Permanency Outcome 1 (P1): Children have permanency and stability in their living situations.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 36% of cases reviewed will be rated as “substantially achieved” on Permanency Outcome 1 of the CFSR-OSRI.</td>
<td>32.2%</td>
<td>36%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>P1 (Item 5): Foster care re-entries.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 97.8% of cases reviewed will be rated as a “substantially achieved” on Item 5 of the CFSR-OSRI.</td>
<td>90.6%</td>
<td>97.8%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of children re-entering foster care in less than 12 months.</td>
<td>8.6%</td>
<td>7%</td>
</tr>
<tr>
<td>Source: SACWIS</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>P1 (Item 6): Stability of foster care placement.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 79.2% of cases reviewed will be rated as a “substantially achieved” on Item 6 of the CFSR-OSRI.</td>
<td>60.2%</td>
<td>79.2%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of children in foster care for up to 12 months with no more than 2 placement settings.</td>
<td>75%</td>
<td>82.3%</td>
</tr>
<tr>
<td>Source: SACWIS</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>P1 (Item 7): Permanency goal for the child.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 95.4% of cases reviewed will be rated as a “substantially achieved” on Item 7 of the CFSR-OSRI.</td>
<td>73.7%</td>
<td>95.4%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>P1 (Item 8): Reunification, guardianship or permanent placement with a relative.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 81.7% of cases reviewed will be rated as a “substantially achieved” on Item 8 of the CFSR-OSRI.</td>
<td>60.6%</td>
<td>81.7%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of Children reunified with their natural families in less than 12 months of entry into care.</td>
<td>60.4%</td>
<td>74.1%</td>
</tr>
<tr>
<td>Source: SACWIS</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>P1 (Item 9): Adoption</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 45.3% of cases reviewed will be rated as a “substantially achieved” on Item 9 of the CFSR-OSRI.</td>
<td>26.8%</td>
<td>45.3%</td>
</tr>
<tr>
<td>Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of children adopted within 24 months from entry into foster care.</td>
<td>33.9%</td>
<td>36.1%</td>
</tr>
<tr>
<td>Source: SACWIS</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>P1 (Item 10): Other planned living arrangement.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 68.1% of cases reviewed will be rated as a “substantially achieved” on Item 10 of the CFSR-OSRI.</td>
<td>16.7%</td>
<td>68.1%</td>
</tr>
</tbody>
</table>
**Permanency Outcome 2 (P2): The continuity of family relationships and connections is preserved for children.**

<table>
<thead>
<tr>
<th><strong>Permanency Outcome 2 (P2):</strong></th>
<th>42.4%</th>
<th>68.9%</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 68.9% of cases reviewed will be rated as “substantially achieved” on Permanency Outcome 2 of the CFSR-OSRI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: PSD QA Data*

**P2 (Item 11): Proximity of foster care placement.**

<table>
<thead>
<tr>
<th><strong>P2 (Item 11): Proximity of foster care placement.</strong></th>
<th>97.1%</th>
<th>99.4%</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 99.4% of cases reviewed will be rated as “substantially achieved” on Item 11 of the CFSR-OSRI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: PSD QA Data*

**P2 (Item 12): Placement with siblings.**

<table>
<thead>
<tr>
<th><strong>P2 (Item 12): Placement with siblings.</strong></th>
<th>81.3%</th>
<th>98.3%</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 98.3% of cases reviewed will be rated as “substantially achieved” on Item 12 of the CFSR-OSRI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: PSD QA Data*

**P2 (Item 13): Visiting with parents and siblings in foster care.**

<table>
<thead>
<tr>
<th><strong>P2 (Item 13): Visiting with parents and siblings in foster care.</strong></th>
<th>44.1%</th>
<th>75.74%</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 75.7% of cases reviewed will be rated as “substantially achieved” on Item 13 of the CFSR-OSRI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: PSD QA Data*

**P2 (Item 14): Preserving connections.**

<table>
<thead>
<tr>
<th><strong>P2 (Item 14): Preserving connections.</strong></th>
<th>65.8%</th>
<th>95.5%</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 95.5% of cases reviewed will be rated as “substantially achieved” on Item 14 of the CFSR-OSRI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: PSD QA Data*

**P2 (Item 15): Relative placement.**

<table>
<thead>
<tr>
<th><strong>P2 (Item 15): Relative placement.</strong></th>
<th>68.2%</th>
<th>87.9%</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 87.9% of cases reviewed will be rated as “substantially achieved” on Item 15 of the CFSR-OSRI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: PSD QA Data*

**P2 (Item 16): Relationship with child in care with parents.**

<table>
<thead>
<tr>
<th><strong>P2 (Item 16): Relationship with child in care with parents.</strong></th>
<th>39.6%</th>
<th>75.4%</th>
</tr>
</thead>
<tbody>
<tr>
<td>By June 30, 2019, at least 75.4% of cases reviewed will be rated as “substantially achieved” on Item 16 of the CFSR-OSRI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: PSD QA Data*

**Permanency Outcome 1 and 2 Strengths**

1. When children enter care, PSD consistently establishes an appropriate permanency goal in a timely manner and develops a written initial assessment plan.
2. In the cases in which children were placed with relatives, these were almost always assessed to be stable placements.
3. PSD places children proximal to their parents, or in cases when the placement is not within an hour it does not negatively impact visitation (97.3% average strength rating over the past five years).
4. Siblings in care are placed together or in cases where they are separated the agency is making concerted efforts to address the reasons for separation (86.2% average strength rating over the past five years).
5. PSD makes diligent efforts to look for relatives when a child enters care and at the onset of the case.

**Permanency Outcomes 1 and 2 Challenges**

1. PSD does not consistently change plans in a timely manner and as case circumstances warrant.
2. There are delays in filing motions to terminate parental rights in a timely manner. Over the past year these delays have been attributed to staff resource issues as well as delays created by the courts.

3. The percent of children reunified with their natural families in less than 12 months of entry into care has been trending downward since SFY 2012.

4. The percent of children in foster care for up to 12 month with no more than two placement settings has been trending downward since SFY 2011.

5. Over the past five years (2009-2013) it was determined that PSD was making concerted efforts to achieve the goal of adoption within 24 months in only 32.7% of cases. In the cases in which adoption was an “area needing improvement,” three themes emerged. The first being insufficient efforts to locate and assess relatives for placement, the second being insufficient recruitment efforts, and the third being delays in adoption activities such as full disclosure.

6. Specifically related to adoption as a concurrent plan, in many of the cases rated PSD did not make sufficient efforts to actively work a concurrent plan unless the child was placed with a relative.

7. PSD does not make consistent efforts to identify, locate, and engage absent parents in order to provide visitation and involvement in the child’s activities.

8. PSD does not make consistent ongoing efforts to search for relatives or to revisit relatives whose circumstances may have changed.

C. Well-being Outcomes 1, 2 and 3

<table>
<thead>
<tr>
<th>Objective</th>
<th>Baseline</th>
<th>2019 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>WELL-BEING OUTCOME 1 (WB 1): Families have enhanced capacity to provide for their children’s needs.</td>
<td>26.4%</td>
<td>48%</td>
</tr>
<tr>
<td>By June 30, 2019, at least 48% of cases reviewed will be rated as “substantially achieved” on Well-being Outcome 1 of the CFSR-OSRI. Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WB1 (Item 17): Needs and services of child, parents, and foster parents.</td>
<td>29.1%</td>
<td>51.5%</td>
</tr>
<tr>
<td>By June 30, 2019, at least 51.5% of cases reviewed will be rated as “substantially achieved” on Item 17 of the CFSR-OSRI. Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WB1 (Item 18): Child and family involvement in case planning.</td>
<td>54.8%</td>
<td>88.1%</td>
</tr>
<tr>
<td>By June 30, 2019, at least 88.1% of cases reviewed will be rated as “substantially achieved” on Item 18 of the CFSR-OSRI. Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WB1 (Item 19): Case worker visits with child.</td>
<td>81.1%</td>
<td>93.5%</td>
</tr>
<tr>
<td>By June 30, 2019, at least 93.5% of cases reviewed will be rated as “substantially achieved” on Item 19 of the CFSR-OSRI. Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WB1 (Item 20): Case worker visits with parents.</td>
<td>32.6%</td>
<td>65%</td>
</tr>
<tr>
<td>By June 30, 2019, at least 65% of cases reviewed will be rated as “substantially achieved” on Item 20 of the CFSR-OSRI. Source: PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WELL-BEING OUTCOME 2 (WB 2): Children receive appropriate services to meet their educational needs.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Well-Being Outcome 2 of the CFSR-OSRI</td>
<td>77.4%</td>
<td>97.6%</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td><strong>WB2 (Item 21): Educational needs of the child.</strong></td>
<td>By June 30, 2019, at least 97.6% of cases reviewed will be rated as “substantially achieved” on Item 21 of the CFSR-OSRI.</td>
<td>Source: PSD QA Data</td>
</tr>
<tr>
<td>WELL-BEING OUTCOME 3 (WB3): Children receive adequate services to meet their physical and mental health needs.</td>
<td>By June 30, 2019, at least 75.8% of cases reviewed will be rated as “substantially achieved” on Well-being Outcome 3 of the CFSR-OSRI.</td>
<td>Source: PSD QA Data</td>
</tr>
<tr>
<td><strong>WB3 (Item 22): Physical health of the child.</strong></td>
<td>By June 30, 2019, at least 90.2% of cases reviewed will be rated as “substantially achieved” on Item 22 of the CFSR-OSRI.</td>
<td>Source: PSD QA Data</td>
</tr>
<tr>
<td><strong>WB3 (Item 23): Mental/behavioral health of the child.</strong></td>
<td>By June 30, 2019, at least 87.4% of cases reviewed will be rated as “substantially achieved” on Item 23 of the CFSR-OSRI.</td>
<td>Source: PSD QA Data</td>
</tr>
</tbody>
</table>

**Well-Being Outcome 1, 2 and 3 Strengths**

1. Typically the assessment of foster parent needs and services is a strength. In 2013, in 84% of the cases reviewed the assessment of foster parent needs was sufficient and in 78% of the cases the appropriate services were provided. So while there is room for improvement, this is an area of strength overall.

2. The agency involves children in case planning as appropriate for their age and development. In 2013 87% of the cases reviewed were a strength as it related to child involvement in case planning.

3. Visitation between the primary worker and the children reviewed is typically of good frequency and quality. In-home service caseworkers typically meet with the children weekly and in permanency planning cases it is at least monthly. The worker visits occur in the child’s residence. This is an area where the written case record is typically well-documented.

4. In the permanency planning cases, foster parent involvement and advocacy in the educational setting was seen as a strength in ensuring that the needs of children were met.

5. In-home service caseworkers routinely assess the educational needs of children as part of their initial assessment regardless of the reason for agency involvement.

6. In 2013, PSD made diligent efforts to ensure that children were referred for early intervention services. In the cases reviewed 82.8% of appropriate cases referred as required by CAPTA and of those 80% received an evaluation. This includes children in foster care and children receiving in-home services.

7. PSD in collaboration with foster parents, makes diligent efforts to ensure that children in care receive timely and appropriate health, dental and mental health services.
Well-Being Outcome 1, 2 and 3 Challenges
1. A fragmented service array around the state impacted the agency’s ability to effectively link parents to needed services, especially those related to substance abuse, domestic violence, mental health, and parenting.
2. PSD does not consistently locate and engage absent and disengaged parents.
3. The quality of visits with parents was impacted because PSD does not consistently visit parents in their homes when the permanency goal is reunification.
4. Children in foster care often experience changes in their educational setting due to placement changes.
5. Accessing special education services and other education supports can be a cumbersome process and effective collaboration between PSD and individual school district varies around the state.
6. In some parts of the state there is a lack of pediatric dental services resulting in insufficient or delayed dental services for children.
7. Assessment and provision of needed mental health services for children was impacted by lack of services and insufficient coordination between providers and PSD caseworkers, especially in cases where the children were placed in regular or relative foster care. Children placed in treatment foster care fared better due to licensing regulations.

D. Systematic Factors

PSD is committed to maintaining a collaborative and cooperative child welfare system that is responsive to the needs of the clients and community in a professional and timely manner. PSD utilizes feedback from constituents and stakeholders in this effort. PSD is committed to a process of continuous quality improvement through training, case review, data analysis, and employee evaluation to create a culture of accountability that aligns our behaviors with our child welfare practice model values and principles. This commitment is furthered by making efforts to be in conformity with the seven systemic factors identified in the CFSR. Systemic factors strengths and challenges were identified and developed in various stakeholder meetings and utilized feedback in the development of the Plan for Improvement.

1. Statewide Information Systems

a. Requirement: *State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.*

b. Statewide Information System Strengths:
   • Protective Services has a Tier 1 statewide information system, known as FACTS (Family Automated Client Tracking System) and provides data reports. FACTS is used during the intake and investigation phase of a case, and can readily identify the status, demographic characteristics, location, and goals for the placement of every child in foster care. All demographic information is readily available through FACTS case and person maintenance windows, as well as the placement services window. The means to monitor the entry and maintenance of the demographic characteristics of the children in care include:
     o The Permanency Planning Status Report (sm0904) includes the client name, case ID, client ID, sex, age, DOB, custody begin date, custody end date, out of home placement begin date, out of home placement discharge date, current placement begin date, months in current placement, months in out of home placement, total number of placements, goal recommended – date recommended, goal ordered – date ordered, concurrent plan, TPR motion, relinquishment, race – ethnicity, tribe\census #, incarcerated parent, age greater than 15 and PPLA.
The All Children in Custody Report (sm0902) includes county of cases, client’s name, custody begin date, assessment planning date, permanency planning goal recommended, date recommended, no of months in plan recommended, worker name, case number, client number, date of birth of client, age, first out of home placement, placement begin date, treatment planning date, permanency planning goal ordered, date ordered, number of months in court ordered plan, supervisor name, IV-E eligibility, custody end date, permanency plan CPS staffing date, permanency plan, adoption staffing date, and number of months in current custody.

- PSD will expand FACTS functionality through the use of Results Oriented Management (ROM). ROM downloads data nightly from FACTS to provide performance information to supervisors and managers in an easy to use and flexible format.

**c. Statewide Information System Challenges:**

- CYFD is moving to EPICS, a web-based application with an implementation target date for PSD of 2018. As a result, there is a code moratorium on changes to FACTS, with exceptions for federally mandated modifications.

- Because the PSD information system is moving to a web based application any new modifications are limited. This has posed a challenge to PSD in obtaining data quickly. Accepted changes to FACTS for mining new data requests can be lengthy and retrieval of such data can be cumbersome. PSD believes that implementation of ROM will assist in pulling new data for managers and supervisors.

**d. Stakeholder Input:** New Mexico’s SACWIS system is an internal database used solely by PSD staff. Over the next five years, PSD plans to hold meetings with stakeholders internal to CYFD to obtain ongoing feedback and assist in identifying challenges posed by moving to EPICS and progress towards goals.

**2. Case Reviews in the Legal System**

**a. Requirement:** The State provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parent(s) that includes the required provisions; a process for the periodic review of the status of each child, no less frequently than once every 6 months; a process that ensures that each child in foster care under the supervision of the State has a permanency hearing no later than 12 months from the date the child entered foster care and no less frequently than every 12 months, thereafter, and a process for termination of parental rights proceedings in accordance with the provisions of ASFA.

**b. Case Review System Strengths**

- PSD has ongoing collaboration with the Administrative Office of the Courts (AOC) and judicial partners through participation in the Children Court Improvement Commission have identified data points in achieving timely permanency. AOC has begun tracking and sharing data points in regards to holding hearings, such as adjudication, permanency and termination of parental rights, in a timely manner and in accordance with ASFA regulations. San Juan and Santa Fe counties are utilizing a judicial cover sheet when a case is filed or dismissed within the court. This will provide enhanced information on dates and timeliness of court hearings, stability of placements and placement changes and educational needs on each individual child.

- PSD conducts a QA legal review every month that supports PSD obtain data on timeliness of court hearings and permanency goal. The QA legal review ICWA questions will assist PSD in obtaining additional data around ICWA compliance.

- PSD staff also participate on workgroups to address issues that have been identified as barriers to timely permanency for children.
- PSD continues to conduct pacing permanency reviews at specified intervals (6 months, 9/10 months, and 13 months) in every case with a permanency plan of reunification.
- PSD continues to conduct family centered meetings (FCMs) whenever there is 48 hour police hold, when a child is assessed to be at risk for placement disruption or in response to a request to move a child in foster care; in anticipation of a change in permanency plan; to consider a trial home visit or discharge from custody, or other appropriate times.
- Continue to implement the youth transition staffing, as required by the 2009 New Mexico Children’s Code amendments, to develop the transition plan for presentation at the discharge hearing.
- In New Mexico, in accordance with the Children’s Code, cases are reviewed by the district court at least every six months, with permanency hearings at least annually.
- Continue to share data related to timeliness of court events with courts. Work with courts and Children’s Court Improvement Commission (CCIC) to address barriers to adjudicatory, permanency, and TPR hearings in order to attain timely permanency for children in custody.
- Continue to coordinate “brown bag lunches” with judicial partners around the state to address specific legal barriers in child protective services cases.
- New Mexico has developed consistent legal forms and templates to be utilized across the state to ensure compliance with state and federal regulations.

c. **Case Review System Challenges:**
   - PSD will increase the percentage of cases in which parents are actively involved in the development and review of case plans.
   - CCAs, GALs, youth attorneys, and children’s court judges, in collaboration with the CCIC will develop strategies to increase the participation of youth and foster parents in court hearings and reviews.
   - PSD will review the process for notifying foster parents of court hearings to identify and create strategies to address barriers to foster parent participation. Provide opportunities to youth to increase knowledge of and comfort with the court system to increase participation.
   - The judicial system in New Mexico struggles in addressing the volume of child protective services case due to overloads in court dockets and use of continuances in various counties in the state.
   - Knowledge of the Children’s Code is lacking in areas of the state where there is not a specific children’s court.

d. **Stakeholder Input:** Over the next five years, PSD plans to continue to participate in various meetings with judicial representatives to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals.

3. **Quality Assurance System**

a. **Requirement:** *The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children, and the State is operating an identifiable quality assurance system that evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.*

b. **Quality Assurance System Strengths:**
   - PSD’s quality assurance (QA) unit conducts monthly case reviews to evaluate provision of services in the areas of safety, permanency, and well-being. QA has begun to formalize a reporting process in collecting data which will be in place by January 2015. This plan will include gathering a list of
peer reviewers, an outline of the types and number of reviews to be completed in a given year, training related to QA and CQI, coaching and technical assistance meetings around a QA reviewer’s role in the agency. This plan will include an evaluation component through the use of surveys to peer reviewers and county office staff.

- After each QA review the counties receive comprehensive QA reports showing the results of the review. The QA unit is working in conjunction with the Data Analysis unit to improve the data and timeliness of the reports. Additionally the QA unit produces an annual report that is a summary of OSRI reviews for the year. The QA unit is in process of developing this report for other types of QA reviews such as the legal and placement review. At the end of the QA review week in each county the county is given a Power Point presentation that includes an overview of CQI as well as the preliminary results of the QA review.

- As of June 2014, PSD management has begun to hold Stakeholder Data Roundtables in a county after a quality assurance review. The purpose of these Roundtables is to present high level data, strengths and challenges for the specific county that may or may not include QA data. A discussion then occurs on other how PSD works with the community to improve these outcomes. As a result of the information we have obtained through QA, county discussions, stakeholder meetings PSD will review their practice and collaborate with stakeholders to continue to improve outcomes.

- The QA unit utilizes The Child and Family Services Review-On Site Review Instrument (CFSR-OSRI) to review a random sample of cases in at least one county per month. The sample includes both permanency and in-home service cases when there is an in-home service program. The QA unit members work in pairs with trained peer reviews and conduct the review on-site in the county office. The review process includes a review of the hard copy case record, a review of the electronic case record (FACTS), and interviews with important case participants, including the primary worker, the child when developmentally appropriate, parents when their parental rights are intact, foster parents, and service providers.

- In addition to the Child and Family Services Review, the QA unit conducts other reviews that have been developed specifically to evaluate and assess targeted practice areas. These reviews include:
  - Legal Review: This review is conducted monthly in the county where the CFSR is being held. A random selection of 20% of the children in foster care, or a maximum of 20 cases, whichever number is greater is selected. The process includes a review of the hard copy legal records, a FACTS review, and meetings to gather the information needed to complete the legal review. The review is conducted by a QA peer review team. The participants in this review are the regional children’s court attorney, the assigned children’s court attorney, the regional manager, and the county office manager, as available. The reviewers evaluate the legal files for timeliness of hearings and required findings at hearings, including the custody hearing, the adjudication, the initial permanency hearing, and ongoing permanency hearings. There are also specific questions to gather data about Indian Child Welfare Act (ICWA) cases, termination of parental rights, and youth in foster care. The intent of the review is to determine the strengths and challenges from the legal perspective and to identify opportunities for improved collaboration between legal services and program services. The QA unit will be developing a process for reporting this data on an annual basis.

- Specific Questions in Legal Review related to ICWA: At this time, the QA unit is not specifically targeting ICWA eligible cases for review, however ICWA cases are reviewed as part of the Legal Review. Historically, results from the review were reported out on a monthly basis and included only the data for the county being reviewed. Beginning in July 2014, the QA unit has begun to gather data to create an annual compliance report in regard to ICWA. During the Legal Review, when a randomly selected case is ICWA eligible, the QA team supplements the review with the following questions to gather data around ICWA compliance:
- Was a notice sent to the Tribe via certified or registered mail?
- Did the notice include the Tribes right to intervene?
- Did the notice include the right to move for transfer of proceedings to the jurisdiction of the Tribe?
- Was the notice sent within ten business days of filing?
- Was the notice received by the Tribe at least ten days prior to adjudication?
- At the (Custody Hearing, Adjudication, Initial Judicial Review, Initial Permanency Hearing, Ongoing Permanency Hearing), was the child placed in accordance with ICWA placement preferences?
- At the (Custody Hearing, Adjudication, Initial Judicial Review, Initial Permanency Hearing, Ongoing Permanency Hearing), if the child was not placed in accordance with ICWA placement preferences, did the Court find that there was good cause to deviate?
- At the Adjudicatory Hearing, did the Court find that active efforts were made to provide remedial services and rehabilitative programs designed to prevent the breakup of the Indian family and that these efforts were proved unsuccessful?
- At the Adjudicatory Hearing, was there clear and convincing evidence, including testimony of a qualified expert witness that the continued custody of the child by the parent of Indian custodian is likely to result in serious emotional or physical damage to the child?
- Did the motion to terminate parental rights include the Tribal affiliations of the child’s parents?
- Did the motion to terminate parental rights to include the specific actions taken by the moving party to notify the parents’ tribes and the results of the contacts, including the names, addresses, titles, and telephone numbers of the persons contacted? Copies of any correspondence with the tribes shall be attached as exhibits to the petition.
- At TPR, did the Court find that active efforts were made to provide remedial services and rehabilitative programs designed to prevent the breakup of the Indian family and that these efforts have proved unsuccessful?
- At the TPR, was there a finding of beyond a reasonable doubt, including testimony of qualified expert witnesses that the continued custody of the child by the parent or Indian custodian is likely to result in serious emotional or physical damage to the child?

- **Foster Care Provider Review:** This review is conducted monthly in the county where the CFSR is being held. The sample includes all of the agency foster homes in which children in the CFSR were placed during a specified period under review. This is a case record review. The purpose of the review is to determine compliance with requirements related to initial and ongoing licensure; including home studies, criminal record checks, and foster parent training.

- **Investigations Review:** This review is conducted periodically and the plan is to have each county reviewed once for base line data and then again in the following calendar year. This review process supports the state’s continuous quality improvement process by providing data to the county office from which specific practice initiatives can be developed and then evaluated again after a period of implementation. To date at least ten counties have been reviewed at least once. The purpose of this review is to evaluate practice specifically related to investigations including initiation, utilization of the safety assessment and safety planning, use of family centered meetings, the completion of required case activities including interviews and home visits, and supervisory oversight. The review process includes a record review and interview with the investigator or supervisor. It is from this review that the practice of pre-initiation case consultation between a worker and supervisor was identified as a best practice.
Statewide Centralized Intake (SCI) Review: This is a periodic review of practice at SCI. The purpose of this review is to gather data specifically related to screening decision during the intake process and other key practice areas including searches, processing of reports, and supervisory oversight.

Other Reviews: As needed the QA unit collaborates with county office to develop and conduct other reviews in order to gather information around specific practice domains. Examples include a review of placement stability, a review of efforts to achieve adoption, and a review of decisions to substantiate investigations.

- The QA unit supports the CQI process by lending technical support to county offices as they assess their needs, develop plans for change, implement those plans, and evaluate their outcomes. Specific CQI initiatives within the QA system include:
  - Increasing staff capacity to assess practice, and understand both qualitative and quantitative data through participation in reviews as peer reviewers.
  - Partnering with county staff to coordinate and execute case reviews.
  - Providing technical support to county staff in interpreting review result, developing program improvement plans, and monitoring ongoing progress.

Quality Assurance System Challenges:
- Although there is an available curriculum for peer reviewers, a tracking system needs to be developed for those who have attended training.
- The QA unit faces a challenge in having a set team of peer reviewers for the review and having committed reviewers back out at last minute.

Stakeholder Input:
Over the next five years, PSD plans to hold stakeholder meetings and Stakeholder Data Roundtable to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals.

4. Staff Training

a. Requirement: The state is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under Titles IV-B and IV-E, and provides initial training for all staff who deliver these services; provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP, and provides training for current or prospective foster and adoptive parents, receiving foster care or adoption assistance under Title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.

b. Staff Training Strengths

- Children, Youth and Families Department Foundations of Practice (FOP) training and PSD’s advanced trainings are designed to support safety, permanency and well-being for children, as well as PSD’s CFSP Plan for Improvement goals. PSD has worked with the Academy for Training and Professional Development to include the Piñon Practice Model, Adaptive Leadership, and Continuous Quality Improvement (CQI) into the FOP curriculum. In order to prepare an employee to perform job duties, an employee is taught child welfare concepts, which include, but are not limited to:
- Trauma informed - A trauma informed component which assists the employee in addressing trauma experienced by the child, birth family or legal guardian, the foster parents and with themselves.
- Child maltreatment - An employee will obtain knowledge in identification of child maltreatment and gain skills in assessing safety threats to the child and identifying parental protective capacities.
• **Worker bias** - An employee will become aware of their personal biases and how those biases may impact their decision making in working with children and families. Recognizing biases assists an employee to be self-aware and may better prepare an employee for their work in child welfare which may help with retention of employees.

• **Communication/Interview/Engagement skills** - An employee learns to communicate and engage children, parents, guardians, foster parents and other partners in child welfare to effectively assist in achieving safety, permanency and well-being for children and families.

• In 2014 CYFD moved the Professional Development Bureau into the Academy for Training and Professional Development. This will allow the department to improve training for staff. The new “core” training called “foundations of practice” will be piloted on June 30, 2014. It will be offered on a monthly basis, will have an evaluative component (employment preparedness assessments and evaluations to employees and supervisors), will provide a blended learning experiences and allow for higher levels of skill building.

• PSD invites all tribal partners to PSD trainings and will be able to obtain additional data related to their attendance and through ongoing communication and collaboration with tribal representatives related to their training needs.

• PSD continues to utilize staff as adjunct trainers for various courses.

• In 2014, the CYFD Academy for Training and Professional Development will purchase a new data system that will provide better tracking of training and provide access to staff regarding training that have been completed and training courses that still need to be completed.

c. **Staff Training Challenges**

  • PSD training has not yet been finalized as it is still in the process of being piloted.

  • Transition from PSD solely developing its own curriculum to now a partnership in development of curriculum between PSD, the Academy and New Mexico State University.

d. **Stakeholder Input:**

  Over the next five years, PSD plans to hold stakeholder meetings to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals.

---

### 5. Service Array

a. **Requirement:** *The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency.*

b. **Service Array Strengths:**

  • PSD has access to QA and 2014 Quality Service Review data.

  • PSD remains involved with the Behavioral Health Purchasing Collaborative (BHPC). PSD and Managed Care Organizations (MCO’s) have implemented a process to provide for timely behavioral health assessments for children when they first enter foster care. Assessment results are used to ensure the timely provision of services and to enhance placement stability.

  • PSD continues to implement the practice of referring children to core service agencies (CSAs) to monitor and treat emotional trauma related to maltreatment and removal from home. CSAs can weave in existing services, bridge treatment gaps and promote the appropriate level of service intensity, all while ensuring that community support services are integrated into treatment. CSAs
are the single point of accountability for identifying and coordinating a targeted client’s behavioral health, health and other social service needs.

- A child abuse response team (CART) serves children and youth statewide. Services include psychological evaluations as well as comprehensive exams, including dental. CART is at the University Hospital and can be used by anyone from other counties if the youth is sent to Albuquerque; it is essentially a trauma team.
- Early periodic screening, diagnosis, and treatment (EPSDT) screenings are considered to be more comprehensive and meaningful than in the past.
- Continue coordination with the family infant toddler program (early intervention services) staff to ensure service delivery to families, refine the referral process as needed, and to access training for staff.
- PSD participates on the association for infant mental health.
- PSD provides child care services to birth parents to enable the child to remain safely in the home and enable parents to participate in their case plan activities. PSD also provides child care to foster families to assist them in meeting the needs of the different children in their home.
- PSD supports and is actively involved with Leaders Uniting Voices, Youth Advocates of New Mexico, an organization of foster care youth and foster care alumni. Members of LUVYA-NM plan the annual Independent Living Youth Conference, and are also involved in planning and participating in the Annual Children’s Law Institute. PSD collaborates with LUVYA-NM and other youth to improve outcomes for older children in care, focusing most recently on youth transitioning out of foster care and examining the needs of youth up to the age of 21.
- PSD actively works with tribal social services, in collaboration with the CYFD Native American liaison (NAL), to ensure tribes are familiar with and have access to PSD services, including Chafee/ETV services, Title IV-E foster care maintenance agreements and training.
- PSD partners with the Early Childhood Services Division of CYFD to promote access and utilization of home visiting programs for families coming in contact with the child protective services system.
- PSD has the ability to complete trauma informed assessments through the neurosequential model of therapeutics (NMT).
- PSD will be implementing monthly stakeholder data roundtable meetings after a QA review has occurred in a county. The purpose of these meetings will be to inform the community about safety, permanency and well-being outcomes. In addition, PSD will seek input and feedback from the community on how to join together to improve outcomes for children and families.
- PSD has data representing the counties and the number of families that have received IV-B services. In FY14:
  - Time Limited Reunification served 134 families. Of the 134 families:
    - 54 were served in Bernalillo County.
    - 21 were served in Dona Ana County.
    - 18 were served in Lea County.
    - 16 were served in Sandoval County.
    - 25 were served in Valencia County.
  - In Home Services served 132 families. Of the 132 families:
    - 21 were served in Bernalillo County.
    - 11 were served in Chaves County.
    - 23 were served in Dona Ana County.
    - 28 were served in Lea County.
    - 14 were served in Socorro County.
• 35 were served in Valencia County.
  o Family Support Services served 128 families. Of the 128:
    • 44 were served in Bernalillo County.
    • 20 were served in Chaves County.
    • 26 were served in Dona Ana County.
    • 10 were served in Socorro County.
    • 28 were served in Valencia County.
  o Fiesta served 890 families.
  o Home Study served 433 families.

In FY13:
  o Adoption Promotion and Support Services Fiesta program served 679 families statewide.
  o Adoption Promotion and Support Services Home Study program served 430 families statewide.
  o Time Limited Reunification 118 families statewide. Of the 118 families:
    • 26 families were served in Valencia Counties.
    • 19 families were served in Dona Ana County.
    • 53 families were served in Bernalillo County.
    • 10 families were served in Sandoval County.
    • 9 families were served in Lea County.
  o In Home Services served 136 families. Of the 136 families:
    • 18 families were served in Bernalillo County.
    • 13 families were served in Chaves County.
    • 20 families were served in Dona Ana County.
    • 18 families were served in Lea County.
    • 27 families were served in Socorro County.
    • 40 families were served in Valencia County.
  o Family Support Services served 124 families. Of the 124 families:
    • 33 families were served in Bernalillo County.
    • 23 families were served in Chaves County.
    • 22 families were served in Dona Ana County.
    • 26 families were served in Socorro County.
    • 20 families were served in Valencia County.

c. **Service Array Challenges:**
   • With the limited services in some counties, PSD will work with existing health care providers and organizations to improve the service array and availability for health and dental health care for child welfare clients.
   • PSD will work to increase number of counties who have communities of care in place.
   • Implementation of centennial care has presented challenges for staff to understand four different organizations method of providing mental health and physical health services for children.
   • A high level of vacancies within community agencies has impacted the availability of services to children and families.
   • New Mexico does not have a comprehensive service array and cannot fully identify community services provided to children or families in individual counties or across the state. PSD will need to collaborate with community providers, IV-B providers, tribal partners, judicial partners and field staff to complete a service array assessment.
d. **Stakeholder Input:**

Over the next five years, PSD plans to hold stakeholder meetings, quarterly IV-B meetings and Stakeholder Data Roundtable meetings after a county QA to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals.

6. **Agency Responsiveness to the Community**

a. **Requirement:** *The State engages in ongoing consultation with tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP; services provided under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population.*

b. **Agency Responsiveness to the Community Strengths:**

- PSD conducted a family survey in 2013. The sample size was not sufficient to allow results to be generalized to the entire state. PSD plan to develop a sustainable survey for capturing the needs of families served in New Mexico.
- PSD administered two customer satisfaction surveys to current and previous foster care providers. As a result of the surveys, customer service plans were developed in the five Diligent Recruitment counties (Lea, Luna, San Miguel, San Juan, and Bernalillo).
- PSD works with Constituent Manager to identify trends in constituent concerns and adjust practice accordingly.
- PSD began Stakeholder Data Roundtables which assist county offices in collaboration with local stakeholders addressing community challenges and identifying solutions to improve outcomes for children and families in that county.
- San Miguel, Grants and Luna Counties have conducted county level customer service surveys as part of office hours experiments.
- PSD has collaborated with state and local law enforcement entities in various counties to develop multi-disciplinary teams (MDT) across the state.
- PSD collaborated in the implementation of a Family Advocacy Center (FAC) in Bernalillo County and is in the process of implementing a Child Advocacy Center (CAC) in Valencia County. Child Advocacy Centers are a safe, secure and caring environment that focuses on the needs of victims of interpersonal crime. The center is committed to providing child victims of domestic violence, child abuse, sexual assault and their families with a safe setting to assist in addressing and overcoming the trauma of their experience and break the cycle of violence that destroys families.
- PSD continues to staff a constituency manager that assists in handling constituent complaints. Constituent complaints can be received by the Office of the Governor, Office of the Secretary or PSD director’s office. The complaint is referred to the constituency manager to respond to the constituent within twenty-four hours. The constituency manager responds to complaints in collaboration with the relevant county office. The Office of the Governor maintains a constituent website where individuals can express their concerns with any state agency. This information is then relayed to the appropriate agency or division to be addressed.
- PSD Continue to participate on the Children’s Court Improvement Commission, the interagency planning committee for the annual Children’s Law Institute, the State/Tribal Judicial Consortium, and other multi-disciplinary, multi-jurisdictional, and interagency organizations in order to identify and address the concerns of partners, constituents, and the community.
- PSD publicizes and conducts public hearings whenever promulgating new or revised policy and the annual Title XX block grant plan.
• PSD has partnered with CYFD Behavioral Health Services to participate in quality service reviews (QSR's). The QSR is an organizational learning process, that observes the practice functions being used, connects results to frontline conditions, support teaching and learning processes that clarify expectations, provide useful feedback and affirm good work and stimulates next step actions to improve practice and results at all levels of an organization.

• PSD conducted two foster parent customer satisfaction surveys (2011 and 2013) with the Step Up! Diligent Recruitment (DR) Grant. The survey was sent to current foster parents, former foster parents and inquiring foster parents. The first survey provided us a baseline. The largest response came from Bernalillo County. Future surveys will be sent out to DR counties (Bernalillo, San Miguel, San Juan, Luna and Lea counties). Customer service plans were developed with the data received from the surveys.

c. **Agency Responsiveness to the Community Challenges**
• PSD will reach out local law enforcement entities in those counties without a MDT.
• Through the Native American liaison, PSD will continue to work with the New Mexico tribes and pueblos to improve the relationship between tribal and state governments.
• PSD worked with Butler Family Institute to develop a family survey that was conducted in 2014. This survey obtained a very small sample as very few birth parents responded. In addition, one region of the state was overrepresented, therefore results could not be generalized. PSD will explore partnering with state universities to develop future family surveys designed to obtain a higher level of responses from birth parents across the state.

d. **Stakeholder Input:**
Over the next five years, PSD plans to hold stakeholder meetings to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals.

7. **Foster and Adoptive Parent Licensing, Recruitment and Retention**

a. **Requirement:** The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards; the State complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children; the State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed, and the State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.

b. **Foster and Adoptive Parent Licensing, Recruitment and Retention Strengths:**
• PSD has administered two statewide customer satisfaction surveys to current and previous foster care providers and one customer satisfaction survey to current foster parents in the five Step Up! Diligent Recruitment counties (Lea, Luna, San Miguel, San Juan and Bernalillo). As a result of the surveys, customer service plans were developed in the five Step Up! Diligent Recruitment counties (Lea, Luna, San Miguel, San Juan, and Bernalillo). Information from the surveys has assisted PSD in development of policy and procedures and the foster and adoptive recruitment and retention plan.
• PSD has qualitative data from the foster parent listening tours that helped direct our customer service plans in the five Step Up! Diligent Recruitment counties.
• Every foster and adoptive parent training has an evaluation component that helps identify if the training curriculum was beneficial.
• The concurrent foster parent training is provided by a foster parent/adoptive parent, individual from the county and a certified trainer and staff and foster parents are trained at the same time. The evaluation helped identify changes that needed to be made in the process or the curriculum.

• PSD partners with various pueblos and Navajo Nation to collaborate with recruitment of Native American foster and adoptive homes and can obtain minimal data on the number of homes recruited and retained.

• PSD will continue to survey foster parents at different points of time to obtain data on customer service and recruitment and retention.

• PSD is developing a process to survey newly licensed foster and adoptive parents.

• PSD continues to collaborate with CYFD Native American liaison, Bureau of Indian Affairs (BIA), Navajo Nation and pueblos to further improve and develop foster and adoptive parent recruitment and retention.

• PSD utilizes the DR grant to test new approaches to recruit foster and adoptive parents, expand concurrent planning for all children in care for whom such planning is appropriate, and develop a customer service model for all protective services staff.

• PSD delivers RAFT, a foster and adoptive parent pre-service curriculum that better prepares foster and adoptive families for children who have been abused or neglected.

• PSD provides the annual foster parent and adoptive family conferences and other training opportunities for foster and adoptive parent skill building.

• PSD established licensing standards and utilizes a uniform process, SAFE home study format, for assessing potential foster or adoptive families.

• PSD had developed and now provides a form to foster parents when they cannot attend a court hearing. This ensures a foster parent’s voice is heard in court.

• PSD provides supports to foster parents through PSD liaisons available in most counties.

• PSD continues to hold and support an annual foster parent conference and an adoptive parent conference.

• County offices continue to conduct foster parent meetings.

c. **Foster and Adoptive Parent Licensing, Recruitment and Retention Challenges:**

• PSD is inconsistent in using data to inform practices around licensing, recruitment and retention of foster and adoptive parents.

• PSD lacks communication and collaboration between placement and recruitment units, which effects efficiency of the work.

• PSD does not utilize all resources, such as current foster parents or youth assisting in recruitment or retention.

d. **Stakeholder Input:**

Over the next five years, PSD plans to hold monthly stakeholder meetings to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals. PSD plans on completing ongoing surveys on customer satisfaction and plans on developing a process to survey newly licensed foster and adoptive parents.
III. Plan for Improvement

Over the next five years, PSD will focus on improving placement stability, decreasing repeat maltreatment and work to improve well-being for all children, youth and families in New Mexico. PSD’s goals and related objectives and strategies will also be tied to reaching 2019 targets for Safety, Permanency and Well-being outcomes in Section II of this Child and Family Services Plan.

Goals identified below are based on QA data, data from the PSD quarterly performance measure (SACWIS data). In alignment with PSD’s vision and mission PSD developed four goals to ensure children can live safely in their homes, and children and families receive services to enhance well-being. IV-B tribal meeting, IV-B provider meetings and April and May 2014 stakeholder input on the seven outcomes and systemic factors within the Child and Family Service Review. In each of the above mentioned meetings PSD’s strengths and challenges were identified and possible solutions and goals were discussed. In April and May 2014, PSD also held weekly internal stakeholder meetings to review the information obtained from the different meetings and data to develop the below goals. See strengths and challenges in Section II –Child and Family Outcomes for specific areas identified.

A. **Goal 1: Improve placement stability for children in PSD custody.**

Over the last five years PSD has seen a downward trend in placement stability. PSD believes by focusing on placement stability and improving in this outcome children will be exposed to less trauma have stronger attachments, and have a more likelihood to achieve permanency in timely manner.

**Objective 1:** Over the next year, PSD will work on the assessment phase of CQI process to identify problems and root causes related to placement stability in hope of expanding existing services, or identifying new services.

**Strategy 1:** By January 30, 2016 PSD will research solutions and collaborate with colleagues and partners, through Piñon Practice Model, Adaptive Leadership Office Hours, and Striving Toward Excellence Program (STEP) to assess and identify root causes.

**Strategy 2:** By 06/30/15 PSD will obtain the Data Roundtable information, Stakeholder monthly meeting information, county meetings as an assessment tool to identify specific opportunities for improvement in placement stability.

**Strategy 3:** By 12/31/14 Select counties, based on data will be asked to focus specifically on placement stability as an adaptive challenge to address in office hours.

**Strategy 4:** PSD will convene statewide meetings quarterly to discuss objective progress.

**Measure:** PSD will measure progress statewide using baselines and targets for Permanency Outcome 1 also outlined in Section II. PSD added Item 6 in order to drill down further specifically to placement stability. Data will be obtained from QA qualitative data and SACWIS data.

<table>
<thead>
<tr>
<th>OBJECTIVE</th>
<th>BASELINE</th>
<th>2019 TARGET</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Permanency Outcome 1:</strong> Children have permanency and stability in their living situations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 36% of cases reviewed will be rated as “substantially achieved” on Permanency Outcome 1 of the CFSR-OSRI. Source: PSD QA Data</td>
<td>32.2%</td>
<td>36%</td>
</tr>
<tr>
<td>Percent of children in foster care for up to 12 months with no more than 2 placement settings. Source: SACWIS</td>
<td>75%</td>
<td>82.3%</td>
</tr>
</tbody>
</table>
By June 30, 2019, at least 86% of cases reviewed will be rated as “substantially achieved” on Item 6 of the CFSR-OSRI. (Stability of Foster care placements)

<table>
<thead>
<tr>
<th>Objective</th>
<th>Baseline</th>
<th>2019 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.</td>
<td>67.3%</td>
<td>85.8%</td>
</tr>
<tr>
<td>Children will not be subject to a substantiated maltreatment report within 6 months of prior substantiated maltreatment.</td>
<td>89%</td>
<td>93%</td>
</tr>
<tr>
<td>Children will not be subject to substantiated maltreatment in foster care.</td>
<td>99.8%</td>
<td>100%</td>
</tr>
</tbody>
</table>

B. **Goal 2: Decrease repeat maltreatment. Children will not have a substantiated maltreatment report within 6 months of a prior substantiated report.**

Over the last five years PSD has seen a downward trend in repeat maltreatment. PSD believes by focusing on repeat maltreatment and improving in this outcome children will be experience less abuse and neglect, resulting in families having fewer referrals and receiving appropriate services.

**Objective 1:** Over the next year, PSD will be working on the assessment phase of CQI process to identify problems and root causes related to repeat maltreatment in hope of expanding existing services, or identifying new services.

**Strategy 1:** By January 2016 PSD will research solutions and collaborate with colleagues and partners, through Piñon, Adaptive Leadership Office Hours, and Striving Toward Excellence Program (STEP) to assess and identify root causes.

**Strategy 2:** By 06/30/15 PSD will obtain the Data Roundtable information, Stakeholder monthly meeting information, county meetings as an assessment tool to identify specific opportunities for improvement in repeat maltreatment.

**Strategy 3**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Baseline</th>
<th>2019 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety Outcome 2: Increase staff knowledge in assessing child safety and increase accuracy and consistency in the use of the New Mexico Child Safety Assessment statewide.</td>
<td>67.3%</td>
<td>85.8%</td>
</tr>
<tr>
<td>Children will not be subject to substantiated maltreatment report within 6 months of prior substantiated maltreatment.</td>
<td>89%</td>
<td>93%</td>
</tr>
<tr>
<td>Children will not be subject to substantiated maltreatment in foster care.</td>
<td>99.8%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**Strategy 4:** PSD will convene statewide meetings quarterly to discuss objective progress.

**Objective 2**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Baseline</th>
<th>2019 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase staff knowledge in assessing child safety and increase accuracy and consistency in the use of the New Mexico Child Safety Assessment statewide.</td>
<td>67.3%</td>
<td>85.8%</td>
</tr>
<tr>
<td>Children will not be subject to substantiated maltreatment report within 6 months of prior substantiated maltreatment.</td>
<td>89%</td>
<td>93%</td>
</tr>
<tr>
<td>Children will not be subject to substantiated maltreatment in foster care.</td>
<td>99.8%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**Measures:** PSD will measure progress statewide using baselines and targets for Safety Outcome 1 also outlined in Section II. Data will be obtained from QA qualitative data and SACWIS data.
C. **Goal 3: Improve assessment of parents and legal guardians needs, including absent and incarcerated parents or guardians, and address the lack of provision of services to meet those needs.**

Over the last five years PSD has obtained information in stakeholder meetings, QA reviews, and through recent loss of services informing us that there is a need to improve assessments of parents and guardians needs and to address the lack of provision to this population. PSD believes by focusing on improving assessments with parents and legal guardians needs will improve parental engagement, improve safety and enhance parental protective capacities reducing repeat maltreatment, and improve timely permanency and be experience less abuse and neglect, resulting in families having fewer referrals and receiving appropriate services.

**Objective 1:** Over the next year, PSD will be working on the assessment phase of CQI process to identify problems and root causes related to assessment of parental/guardian needs and provision of services in hope of expanding existing services, or identifying new services.

- **Strategy 1:** By January 2016 PSD will research solutions and collaborate with colleagues and partners, through Piñon, Adaptive Leadership Office Hours, and Striving Toward Excellence Program (STEP) to assess and identify root causes.
- **Strategy 2:** By 06/30/15 PSD will obtain the Data Roundtable information, Stakeholder monthly meeting information, county meetings as an assessment tool to identify specific opportunities for improvement in assessment of parental/guardian needs and addressing lack of services.
- **Strategy 3** By 12/31/14 Select counties, based on data will be asked to focus specifically on assessment of parental/guardian needs and addressing lack of services as an adaptive challenge to address in office hours.
- **Strategy 4:** PSD will convene statewide meetings quarterly to discuss objective progress.

**Measures:** PSD will measure progress statewide using baselines and targets for Well-Being Outcome 1 also outlined in Section II. PSD added Item 17, and focus in particular on Item 17 B, in order to drill down further specifically to services and needs related to parents and legal guardians. Data will be obtained from QA qualitative data.

<table>
<thead>
<tr>
<th><strong>OBJECTIVE</strong></th>
<th><strong>BASELINE</strong></th>
<th><strong>2019 TARGET</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Well-Being Outcome 1: Families have enhanced capacity to provide for their children</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 48% of cases reviewed will be rated as “substantially achieved” on Well-being Outcome 1 of the CFSR-OSRI.</td>
<td>26%</td>
<td>48%</td>
</tr>
<tr>
<td><strong>Source:</strong> PSD QA Data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, at least 52.1% of cases reviewed will be rated as “substantially achieved” on Item 17 of the CFSR-OSRI. <em>(Needs and Services of child, parents and foster parents)</em></td>
<td>29%</td>
<td>52.1%</td>
</tr>
<tr>
<td><strong>Source:</strong> PSD QA Data</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
D. **Goal 4: Increase recruitment and retention of PSD field staff.**

Over the last five years PSD has seen an upward trend in PSD field staff vacancies. PSD believes by focusing on PSD field staff recruitment and retention PSD field staff will have decreased caseloads resulting in safety, permanency and well-being outcomes for children and families.

**Objective 1:** Through the use of a comprehensive CQI system PSD will identify problems and root causes related to recruitment and retention of CPS field staff and children’s court attorneys.

**Strategy 1:** By 06/30/15 document a “snap shot” of demographics of PSD’s workforce.

**Strategy 2:** By 06/30/15 utilize initial qualitative data from PSD’s partners at New Mexico State University (NMSU) regarding other methods to recruit and retain staff.

**Strategy 3:** By 06/30/15 conduct caseload analysis for CPS field staff. This will include focus groups with former and current employees to gather input about recruitment and retention.

**Strategy 4:** By 06/30/15 complete an initial analyze salary matrix and compensation.

**Strategy 5:** By 09/01/15 use initial data gathered from the “snap shot”, caseload analysis and information from NMSU to plan for next steps. These next steps will include using data to begin planning and working with the Department of Finance and Legislative Finance Committee to request any increase in changes in compensation and new staff required.

**Strategy 6:** By 07/01/15 use initial data gathered from training evaluations and focus groups to continue to enhance training of staff and supervisors.

**Strategy 7:** By 09/01/14 begin to look at use of technology to support field and begin to provide tools that allow them to be more efficient.

**Strategy 8:** By 09/01/14 begin to review policies and procedures related to hiring and employment and make recommendations for any changes necessary to assist in recruitment and retention.

**Objective 2:** Utilize national data and processes around screening and selecting potential employees for CPS field positions.

**Strategy 1:** By 12/01/14, finalize the “Job Preview” video.

**Strategy 2:** By 12/31/14 Select counties, based on data will be asked to focus specifically on PSD field staff recruitment and retention to address in office hours.

**Measures:** Vacancy rates will be calculated by dividing the total number of PSD field positions and the number of vacant PSD field positions. The baseline data for vacancy rate and time to hire was developed from June 2014 data from SHARE. The vacancy rate will be reported and calculated monthly and averaged annually. Time to hire data will be calculated from the date the job ad closes to the employees start date. Turnover rate data will be calculated by utilizing number of separations (minus death, retirement, and dismissal) and the average number of filled positions over the same time period. PSD is currently at 27.4%, but PSD utilizes a different methodology then other states and this does not provide a good baseline. PSD will develop our baseline for turnover rate by June 30, 2015 and then develop a 2019 target.
<table>
<thead>
<tr>
<th><strong>OBJECTIVE</strong></th>
<th><strong>BASELINE</strong></th>
<th><strong>2019 TARGET</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Increase recruitment and retention of PSD field staff.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, PSD will achieve a vacancy rate of 14% for PSD field staff.</td>
<td>19.1%</td>
<td>14%</td>
</tr>
<tr>
<td>Source: SHARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2015, PSD will decrease the PSD field staff vacancy rate by 1%.</td>
<td>19.1%</td>
<td>18%</td>
</tr>
<tr>
<td>Source: SHARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2016, PSD will decrease the PSD field staff vacancy rate by 1%.</td>
<td>19.1%</td>
<td>17%</td>
</tr>
<tr>
<td>Source: SHARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2017, PSD will decrease the PSD field staff vacancy rate by 1%.</td>
<td>19.1%</td>
<td>16%</td>
</tr>
<tr>
<td>Source: SHARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2018, PSD will decrease the PSD field staff vacancy rate by 1%.</td>
<td>19.1%</td>
<td>15%</td>
</tr>
<tr>
<td>Source: SHARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 30, 2019, PSD will decrease the PSD field staff vacancy rate by 1%.</td>
<td>19.1%</td>
<td>14%</td>
</tr>
<tr>
<td>Source: SHARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Decrease time to hire period for PSD field staff.</strong></td>
<td>79 days</td>
<td>65 days</td>
</tr>
</tbody>
</table>
IV. Services

A. Child and Family Services Continuum

Protective Services
The process is unique for each child and family. Not every report becomes a case nor does every case enter every phase. This “Flow Chart” is a general overview of a complex multi-step process showing only key selected steps. The PS process focuses on the safety, well-being and permanency of children and the strengthening of families.

- Report Arrives SCI (Statewide Central Intake)
- Abuse/Neglect Report Screened IN*
- Abuse/Neglect Report Screened OUT*

* And cross reported to law enforcement

- Case Assigned to County for Investigation
- Family Centered Meeting
- Legal Case Filed or Case Closed
- Staffing: DECISION POINT
- Case Transfer to In-Home Services (non-legal)
- Reunification
- Adoption
- Permanent Guardianship
- Planned Permanent Living Arrangement
- Youth Services
**B. Service Coordination**

PSD has identified service array and service coordination as one of our priority objectives. Over the next five years, PSD plans to engage with community providers and the New Mexico Human Services Department, and utilize the Child and Family Service Review and system of care process to:

- Identify the gaps in services and referral process;
- Diagnose the challenges and begin a systematic process to improve relationships; and
- Develop services to meet the needs of children and families in the child welfare system.

This has been identified as an objective in meeting our 2019 goal discussed in section III of this report. Over the last year, New Mexico’s current service array system and care coordination process have been negatively impacted by the change by services providers in July 2013 and the centennial care Medicaid expansion. PSD recognizes that this will require collaboration on the part of PSD’s executive management, division managers, county offices and community service providers.

New Mexico defines a system of care as an array of effective, community-based services and supports for children and youth with, or at risk of, mental health or other challenges and their families. The array of services and supports are organized into a coordinated network that will build meaningful partnerships with families and youth and address cultural and linguistic needs. The goal is to assist children and youth and their families to function better at home, in school, in the community, and throughout life to actively participate in community groups to discuss services, care coordination, needs and resources. PSD utilizes core services agencies, communities of care and the wrap around care model to work with children and families around the state.

New Mexico is implementing communities of care in 12 sites. Community of care is defined as “a network of services, supports, and relationships built by committed people who have a stake in improving outcomes for children and youth with serious behavioral health challenges.” Building a community of care requires the engagement of multiple stakeholders and a foundation of trusting and respectful relationships. Communities of care is primarily designed for children and youth, and their families, who are:

- in an out of home placement or at high risk of out of home placement;
- involved in with either protective services or juvenile justice services;
- have received a behavioral health diagnosis that qualifies them for services provided by core service agencies; and
- meets the medical necessity criteria for residential treatment.

**C. Service Description**

This section provides a brief narrative description of the services provided in each of the program areas. Services are provided statewide unless specifically noted. The child welfare services described in section 1 below are provided through a combination of funds, as permitted in the State’s federally approved Cost Allocation Plan. These funding sources include the Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B subpart 1), CBCAP, Title IV-E, and the New Mexico General Fund. Section 2 below describes services provided through the Promoting Safe and Stable Families Program (Title IV-B subpart 2). Services funded through the Child Abuse Prevention and Treatment Act (CAPTA) are described in section 3 below, and the Chafee Foster Care Independence Program and Education and Training Voucher Program are described in section 4.

Over the next five years, PSD’s Plan for Improvement goals will focus on improving placement stability, decreasing repeat maltreatment, assessment and provision of parent or guardian needs, and recruitment and retention of PSD field staff. PSD’s goals and related objectives and strategies will also be tied to reaching 2019 targets for Safety, Permanency and Well-being outcomes in Section II of this Child and Family Services Plan.

Goals were identified from QA data, data from the PSD quarterly performance measure (SACWIS data), IV-B tribal meeting, IV-B provider meetings and April and May 2014 stakeholder input on the seven outcomes and
systemic factors within the Child and Family Service Review. In each of the stakeholder meetings PSD’s strengths and challenges were identified and possible solutions and goals were discussed. In April and May 2014, PSD also held weekly internal stakeholder meetings to review the information obtained from the different meetings and data to develop the below goals. See strengths and challenges in Section II –Child and Family Outcomes for specific areas identified. Each of the services below can assist PSD in achieving our identified goals.

1. **Child Welfare Services**

   Most services provided by PSD fall in the category of Child Welfare Services, designed to prevent child abuse and neglect, respond to allegations of abuse and neglect, intervene and provide services to maltreated children or children at risk of maltreatment and their families, provide foster care and permanency to children needing protection and youth services to older youth in foster care, youth who emancipated from the foster care system and youth adopted from foster care after age 16. All these services are focused on assuring the safety, permanency, and well-being of the children served by PSD.

   a. **Child Abuse and Neglect Prevention Services**

      With federal CBCAP and state general funds, PSD provides community-based prevention and support services through a combination of contracted and direct services. In keeping with federal directions, PSD’s approach to CBCAP planning, programming, and monitoring emphasizes:
      - greater use of evidence-based or evidence-informed programs and projects;
      - efforts to enhance parental capacity and parental involvement in CBCAP program development;
      - better integration with child welfare services (as a front-end component of the continuum of services),
      - services for underserved populations, and
      - more effective use of leveraging funds to support prevention activities.

      These requirements have been incorporated in requests for proposals released for the provision of CBCAP services. PSD continues to work with providers to support them in getting trained in the evidence based curriculum, Positive Parenting Program (Triple P) and the evidenced informed curriculum, Circle of Security – Parenting (COS-P). PSD will continue to monitor these programs using the protective factors survey and an independent evaluation in order to ensure continuous quality feedback.

      PSD continues to provide prevention services through public speaking, participation in community based training events and conferences, and informational materials. PSD is working with a local marketing agency to develop and administer a child abuse and awareness campaign around three themes:
      - Shaken baby syndrome
      - Bed sharing
      - Leaving children unattended in vehicles for long periods of time during extreme weather

   b. **Child Protective Services Intake**

      Reports are received by PSD’s statewide central intake (SCI) through the state’s toll free number or a “short code” #SAFE (#7233) from cell a phone. SCI responds to calls and is staffed 24 hours a day, seven days a week with professionally trained workers. The intake worker utilizes the SDM screening and response priority tool. Completion of the tool results in a recommended determination regarding the acceptance and priority assignment of the report for investigation. The toll-free line has the capacity for callers in both English and Spanish, and there are separate dedicated phone lines for law enforcement and juvenile justice sources. All reporters who leave a name and address receive a letter which informs them if the report has been accepted.
for investigation or not and the location and phone number of the county field office the report was assigned
to in case the caller has further information.

c. Child Protective Service Investigation

Reports of abuse or neglect that meet the state’s criteria for investigation are assigned a priority status based
on the severity of harm or safety concerns of the child, including CAPTA requirements regarding an infant born
drug-addicted or exposed. Emergency reports are initiated within three hours from the acceptance of the
report at SCI, Priority 1 reports within 24 hours, and Priority 2 reports within five calendar days. PSD is
responsible for conducting civil investigation of allegations of child maltreatment; law enforcement conducts
criminal investigations. County offices work with local law enforcement to coordinate when each entity is
involved.

Investigations are conducted by workers in the county field offices. The investigation decision, due within 45
days of the report, includes a determination of substantiated or unsubstantiated on each of the allegations in
the report. The services of medical professionals, mental health professionals and other related professionals
are used as appropriate to assess the safety of the child, threat of risk of harm to the child, the protective
capacities of the caregivers, and the family’s needs and strengths. The workers use standardized safety and risk
assessment tools to make a determination about what actions, if any, should be taken by PSD. Children under
the age of three who are subject of a substantiated report of child maltreatment, whether or not they enter
PSD custody, are referred to the state’s early intervention program, Family Infant Toddler (FIT), for an
assessment.

By state law, only law enforcement can remove a child from the home without the order of the court. As part
of a set of amendments passed by the 2009 legislature, the state’s Children’s Code now requires that law
enforcement contact PSD before placing the child into custody. PSD conducts an on-site safety assessment to
determine whether or not it is appropriate to take the child into custody. In addition, the law now clarifies that
PSD may release a child from custody within the two-day emergency temporary custody time period if is
determined that release is appropriate.

d. In-Home Services

The purpose of in-home services (IHS) is to promote the safety of children and reduce the risk of the
recurrence of maltreatment of children by their parents or legal guardians without the intervention of the
courts. Services are designed to enhance the family’s capacity to provide for their children’s needs in a safe
environment, create stability within the home and develop healthy and supportive ongoing community
relationships. IHS is an integrated, comprehensive approach to strengthening and preserving families who are
at risk for, or who are currently experiencing problems in family functioning. IHS case interventions are
provided for a maximum of 180 days with a possibility of up to three 45 day extensions. PSD continues to look
at ways to evaluate IHS effectiveness and determine if changes need to be made to current practice.

e. Foster Care

Permanency planning services (foster care services) are provided when legal intervention is required to protect
a child’s safety and enhance the child’s well-being. Legal intervention often involves a child in state custody
being placed in foster care. New Mexico’s Children’s Code contains the requirements of the Adoption and Safe
Families Act and other relevant federal laws, including the Safe and Timely Interstate Placement of Foster
Children Act of 2006, the Child and Family Services Improvement Act of 2006, and the Adam Walsh Child
Protection and Safety Act of 2006. Changes to the Code in 2009 assure compliance with the Fostering
Connections to Success and Increasing Adoptions Act of 2008.

Entry into Custody: A child can enter PSD custody through emergency placement by law enforcement,
however an abuse/neglect petition must be filed with the district court within two business days of custody or
the child will be returned to the parent or guardian. PSD has the responsibility to make reasonable efforts to
prevent the removal of a child from the home; however, the child’s safety always takes precedence. If a child enters foster care, PSD then has the responsibility to make reasonable efforts to reunify the child with the parent or guardian, if that can be done safely for the child.

**Permanency Planning Services:** Permanency planning services include services needed to enhance caregiver protective capacities to manage the safety and risk factors present in the child’s family. PSD establishes a permanency plan for every child in PSD custody. Reunification is the initial plan of choice for each child, unless that plan is determined not to be appropriate. Other acceptable plans are adoption, permanent guardianship, placement with a fit and willing relative, and other planned permanent living arrangement.

**Level of Care:** Children are assessed upon entry into foster care for their appropriate level of care. The child’s level of care determines the maintenance payment amount, identifies the needs of the child, the skill level of the foster care provider and provides an initial assessment of the needs of the foster care provider. All children enter foster care as a level 1 placement. Children who have a higher level of need than the general population of children in out of home care and who also require a higher level of supervision and skill by the substitute care provider are eligible for level 2 foster care. Level 3 foster care is for those children with significant medical or behavioral needs who require a significantly and consistently higher level of care from a highly trained caregiver. These are children who would otherwise require hospitalization or institutional placement.

**Health Care:** Children who are legal residents of the United States in out-of-home care are eligible for Medicaid, either through Title IV-E eligibility, SSI or state-funded care. Medical care is provided for children who are non-citizens through state funds. Children receive early periodic screening diagnostic and treatment (EPSDT) assessment within the first 30 days of placement; this begins the process to identify any needs they have and begin early intervention. Caseworkers record health care information in FACTS, the state SACWIS system, and work with the foster care provider to maintain the child’s traveling file to provide for continuity of health care information should the child change placement or exit foster care. Youth emancipating from foster care are provided copies of their health care records.

**Representation and Advocacy:** For every legal custody case, the parent or guardian is appointed an attorney if they cannot afford one, and every child is appointed an attorney guardian ad litem (GAL) or a youth attorney. Children under the age of 14 are appointed a GAL who represents the best interest of the child. Older youth have a youth attorney who represents the position and wishes of the child. Many children are assigned a court appointed special advocate (CASA), who acts as an advocate for the child and reports on the status of the child to the judge at reviews. New Mexico has a citizens review board (CRB) system, and boards around the state conduct reviews of legal custody cases on a periodic basis.

**Foster Care Providers:** PSD recruits, trains, licenses, and maintains foster families for placement of children. There is an emphasis on placements with relatives, and policy directs that relative placement options be considered throughout the life of the case. Both relative and non-relative foster care applicants are required to complete the same set of licensing criteria, including a criminal records check, training, a home safety check list, and a mutual assessment process to identify the strengths of the applicant family and their appropriateness for caring for children in state custody, whether temporarily in foster care or permanently in adoption. PSD policy and procedure detail the requirements for local, state and federal criminal record checks for persons applying to be foster parents or relative foster parents. Criminal background checks and abuse and neglect checks are also required for any adult residing in the home of the foster parent or relative foster parent applicant. PSD provides foster care maintenance payments to substitute care providers as financial reimbursement for the care of children placed in their home. Maintenance payments are supported by both general funds and Title IV-E funds.

### 2. **Promoting Safe and Stable Families Program**

The continuum of services funded through the Title IV-B Subpart 2 Promoting Safe and Stable Families (PSSF) Program is complemented by other services provided to children, youth and families by PSD through state general funds and other funding sources. PSD allocates 20% of PSSF funds for each of the four allowable
services: Family Support Services, Family Preservation Services, Time-Limited Reunification Services and Adoption Promotion and Support. In addition, PSD allocates 10% of PSSF funds for administrative costs which include the salaries and operating costs of program managers who are administering the delivery of these services statewide. The remaining 10% is allocated for program support costs which includes training, evaluation, CQI, CFSR and staff recruitment and retention.

Contracts are issued through a competitive procurement process. The requests for proposal (RFP) requires that all agencies be community based providers. PSD staff located statewide serve as the evaluators for the RFP evaluation committee; they make recommendations for awards after evaluating the submitted proposals. CYFD then awards the contracts to the community based agencies determined to be the most qualified to deliver the service. In spring 2012, PSD issued RFPs for the PSSF Programs. The new contracts were executed for a contractual period of July 2012 through June 30, 2016. PSD provides training and ongoing technical assistance to all PSSF contractors including a weeklong intensive provider core training to all new contractor staff.

a. **Family Support**

Family Support Service (FSS) contractors provide services to parents and secondary caregivers to prevent child maltreatment. Families with a child age 0-5 who are at risk of child abuse and neglect or foster and adoptive families who have been referred by PSD and have one or more foster and adoptive children age 0-18 in their home are eligible for these services. Referrals can be made to FSS contractors from a variety of sources within the community; however, PSD referrals are given priority. Contracts were awarded to community based service providers throughout the state. PSD currently has FSS programs in Bernalillo and Dona Ana counties. An RFP is pending release for Valencia County. PSD is also in the process of an RFP that will serve two additional counties.

FSS are intensive home-based services focused on providing support to eligible families and enhancing child and family well-being. The types of services which may be provided to families through FSS include:

- Home visits;
- Case management;
- Crisis intervention;
- Evidence-based parent education curriculum;
- Parent support visits;
- Parent Leadership Councils;
- Information and referral;
- Support services;
- Life skills;
- Education and training;
- Mentoring, and
- Transportation

b. **Family Preservation**

PSD implements family preservation services through our IHS program. The model incorporates the basic principles of family preservation services as an intensive in-home service while recognizing that the short-term crisis intervention model did not offer the sufficient amount of time needed to address the complex needs of the children and their families. In-home services is an integrated comprehensive approach to strengthening and preserving families who are at risk for or who are currently experiencing problems in family functioning and are at imminent risk of having a child removed from the home due to abuse or neglect. Family needs and strengths are identified through an initial as well as an on-going assessment process; the intervention process builds upon the family’s existing strengths while supporting and expanding their network of resources in order to increase their capacity to meet the needs of the family system and those of the individual family members. The model also encourages and promotes a strong partnership between the department and the family and
incorporates traditional and nontraditional supporting agencies, individuals and organizations into the intervention based on the unique qualities and characteristics of each family.

For the past several years, family preservation services have been available to families in most counties throughout the state through direct services provided by IHS staff or contract services from community based providers. In FY13 family preservation services were available in Bernalillo, Chaves, Dona Ana, Lea, Socorro and Valencia counties. PSD currently has family preservation services in Bernalillo, Dona Ana and Lea counties. An RFP is pending release for Valencia County. PSD is also in the RFP process for two additional counties. The IHS model has supported PSD in its efforts to reduce the occurrence of child abuse and neglect by moving services towards addressing the factors that place the family at risk for child maltreatment through problem solving and assistance to families. Family preservation services are provided to enhance the family’s capacity to provide for their children’s needs in a safe environment with an emphasis on skill building and is a method utilized to help maintain the family unit and prevent out of home placement of the child. The services are time-limited and are focused on the effective management of identified safety threats while enhancing caregiver protective capacities. The purpose of these services is to enhance family capacity to provide for child safety and reduce the risk of abuse and neglect using the family’s strengths while addressing family needs.

Families are eligible regardless of income. Referrals are made by PSD when a child in the home has been assessed to be conditionally safe and the risk of maltreatment has been determined to be moderate or high; or the child has been assessed to be unsafe and the risk of maltreatment has been determined to be very low, low, moderate or high. Families whose children are in the legal custody of PSD are ineligible for referral. Contracts were awarded statewide to community based providers. Families referred to contractors by PSD receive family preservation support every week for six months in the following areas:

- Safety planning
- Case management
- Skill building including parenting, conflict management, communication and life skills
- Crisis management
- Transportation
- Assistance in finding housing
- Counseling

c. **Time-Limited Reunification**

Time-limited reunification (TLR) contractors provide services to families when a child cannot be safely maintained in the home and the child enters foster care. TLR contractors are required to provide intensive services to families and assist PSD in reunifying families in an expedited time frame (no more than four months from the date of referral and within 12 months of the most recent removal from the home). In addition, TLR contractors are required to conduct at least one home visit per month for up to four months after PSD has closed the case in order to provide support services to the family. TLR services are available to families 24 hours a day, seven days a week. The services provided through TLR are multifaceted and may include the coordination of resources to support safety plans, the provision of supervised and monitored visitation, parent education and skill building and monitoring when the child returns to the home. These contracts also incorporate monthly meetings that include the TLR provider, the biological family, PSD worker, other service providers and/or interested parties; the focus of the monthly meetings is to review the safety assessment, treatment plan, reunification goals, visitation plan and progress related to the reunification plan to ensure the family is receiving the appropriate services required to achieve timely reunification. PSD utilizes ancillary support services provided by other program areas and other state agencies such as childcare, substance abuse intervention, mental health intervention, and employment assistance in effort to further support the reunification process.

TLR were awarded to community based service providers statewide. In FY13 PSD had TLR services in Bernalillo, Dona Ana, Lea, Sandoval and Valencia counties. PSD currently has TLR services in Bernalillo, Dona Ana, and Lea
counties. An RFP is pending release for Valencia County. PSD is also in the process of issuing an RFP for two additional counties.

d. Adoption Promotion and Support

When it is determined that a child cannot be reunited safely with their parent or guardian, PSD works to identify an adoptive home that will meet the child’s unique needs and provide a nurturing, stable family environment. PSD has a policy preference for placement with and adoption by relatives. Both relatives and non-relatives have the same licensing requirements which includes criminal records checks, child abuse and neglect checks, pre-service training, home safety check and mutual assessment process. PSD works to minimize the trauma often associated with changes in placement by implementing concurrent planning and encouraging adoption of children by their current foster parents.

PSD provides adoption promotion and support services through a combination of PSD staff and contracted services. PSD staff and contract providers are available to recruit, train and study foster and adoptive families as well as provide post-placement support services. Post adoptive support services are available through state and IV-E subsidies. PSD works with AdoptUSKids, the Adoption Exchange and other national exchanges to conduct child-specific recruitment for children needing adoptive families. The contract with the Adoption Exchange provides a quarterly newsletter for all adoptive parents.

PSD continues to utilize the Structured Analysis Family Evaluation (SAFE) home study process throughout the state. The SAFE home study process, which includes an extensive psychosocial assessment of all household members of a prospective foster and adoptive family, is intended to result in a more comprehensive evaluation of family functioning and more safe and stable placement options for children.

PSD also contracts with a statewide agency to provide post-decree family support services for adoptive families. The FIESTA program includes family activities, education, support groups, a warm line and training, networking and social opportunities for adoptive parents and specialized training in adoption competence for therapists and mental health professionals who provide therapeutic services to PSD families. Information is available to adoptive families statewide through a lending library of books, videos, and DVDs. PSD also sponsors a blog as another opportunity for parents to network on-line. Adoptive parent family contacts reside in and serve each of the five PSD regions and are responsible for coordinating activities and running the warm line.

PSD will continue to offer the annual Adoption Conference to all adoptive families and their children. The FIESTA Program assists in the planning of the conference and ensures program staff is available to assist at the event. The conference allows adoptive families to meet other adoptive families and for parents to receive training on adoption related topics while their children are engaged in activities during the day.

In the 2009 Legislative session, the New Mexico Children’s Code was amended to require that a motion for mediation in contemplation of an open adoption be filed when PSD files a motion for termination of parental rights. The Code was also amended to include the option of post-adoption contact agreements among siblings. This service continues to be funded through PSSF funds and is currently provided by the Administrative Office of the Courts.

PSD also continues its partnership with the Heart Gallery of New Mexico. The Heart Gallery offers small grants to children and families to support special needs of the family that may include training, camps, and or additional support. The Heart Gallery of New Mexico has been an invaluable resource for supporting PSD adoption recruitment efforts.

Adoption Promotion and Support services are provided statewide and available in every county.
3. **CAPTA**

PSD is the state agency responsible for administering the Child Abuse Prevention and Treatment Act (CAPTA) state plan. The CAPTA plan shares many of the same goals and objectives found within Child Welfare Services and PSSF, and agency policies and procedures and state law have been made compliant with the CAPTA requirements. PSD’s CAPTA Plan is submitted separately from the Child and Family Service Plan.

4. **Chafee Foster Care Independence Program**

New Mexico provides services to meet the needs of older youth in foster care, those youth who have emancipated out of foster care, and those youth adopted from the foster care system at sixteen years of age or older. A statewide youth advisory board, Leaders Uniting Voices, Youth Advocates of New Mexico participates in developing the youth services program (independent living program) and provides feedback and suggestions to PSD staff, foster parents and community providers. PSD is committed to partnering with youth to identify and develop relationships with adults who can serve as mentors and advocates as the youth transitions to adulthood.

Components of New Mexico’s Chafee Foster Care Independence Program are provided in more detail in Section VI.

5. **Education and Training Vouchers**

PSD continues to strengthen the ETV program through outreach activities and the engagement of youth to assist in accessing post-secondary educational opportunities and increasing their participation in the ETV program. Components of New Mexico’s ETV program are provided in more detail in Section VI.

D. **Service Decision Making Process for Family Support Services**

Agencies and organizations are selected for funding to provide family support services through the CYFD request for proposal process. The Community Services Bureau within PSD partners with CYFD’s Contract Development Unit to develop and release RFP’s to those agencies and organizations that provide services specific to FSSP requirements. Agencies and organizations provide CYFD with proposals for contract. These proposals are evaluated by a team of field staff and community service bureau employees. Once evaluated, the team makes a recommendation to Office of Secretary on who to award the contract.

Once the contract is awarded, the Community Service Bureau and Contract Development Unit negotiate final contract with the selected agency or organization.
E. Populations at Greatest Risk of Maltreatment

PSD has recognized that New Mexico’s population at greatest risk of maltreatment are children aged 0 to 5 years old. As indicated by the chart below, the percentage of maltreated victims for years 2009 through 2012 has been consistently higher for those aged 0-5. (Source: ACF website Children’s Bureau Child Welfare Outcomes Report Data (http://cwoutcomes.acf.hhs.gov/data/tables/mal_childvictims?states[]=32&state=&region=))

<table>
<thead>
<tr>
<th>Age of Victim</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 1</td>
<td>11</td>
<td>10.7</td>
<td>10.7</td>
<td>11.2</td>
</tr>
<tr>
<td>1 Year</td>
<td>7.3</td>
<td>7.7</td>
<td>7.6</td>
<td>7.1</td>
</tr>
<tr>
<td>2 Years</td>
<td>7.2</td>
<td>7</td>
<td>7.4</td>
<td>6.5</td>
</tr>
<tr>
<td>3 Years</td>
<td>6.4</td>
<td>6.3</td>
<td>7.1</td>
<td>6.9</td>
</tr>
<tr>
<td>4 years</td>
<td>6.3</td>
<td>6.6</td>
<td>7</td>
<td>6.7</td>
</tr>
<tr>
<td>5 years</td>
<td>6.3</td>
<td>6.6</td>
<td>7.1</td>
<td>6.4</td>
</tr>
<tr>
<td>6 years</td>
<td>6.7</td>
<td>6.6</td>
<td>6.7</td>
<td>7</td>
</tr>
<tr>
<td>7 years</td>
<td>6.3</td>
<td>6.6</td>
<td>6.1</td>
<td>5.8</td>
</tr>
<tr>
<td>8 years</td>
<td>5.8</td>
<td>5.7</td>
<td>6</td>
<td>5.5</td>
</tr>
<tr>
<td>9 years</td>
<td>5.4</td>
<td>5.3</td>
<td>5</td>
<td>5.1</td>
</tr>
<tr>
<td>10 years</td>
<td>4.6</td>
<td>4.9</td>
<td>4.7</td>
<td>5.3</td>
</tr>
<tr>
<td>11 years</td>
<td>4.3</td>
<td>4.7</td>
<td>4.6</td>
<td>5.2</td>
</tr>
<tr>
<td>12 years</td>
<td>4</td>
<td>4.5</td>
<td>4.4</td>
<td>4.6</td>
</tr>
<tr>
<td>13 years</td>
<td>4.5</td>
<td>4</td>
<td>3.9</td>
<td>4.1</td>
</tr>
<tr>
<td>14 years</td>
<td>3.4</td>
<td>4.2</td>
<td>4</td>
<td>3.8</td>
</tr>
<tr>
<td>15 years</td>
<td>3.9</td>
<td>3.2</td>
<td>2.6</td>
<td>3.2</td>
</tr>
<tr>
<td>16 years</td>
<td>3</td>
<td>3</td>
<td>2.8</td>
<td>3</td>
</tr>
<tr>
<td>17 years</td>
<td>1.8</td>
<td>1.8</td>
<td>1.8</td>
<td>2</td>
</tr>
<tr>
<td>18+ years</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

In recognition of this population, PSD has initiated a workgroup to develop standards, policies and procedures related to the mental health of infants. The group will review current policies, procedures, best practices and current literature related to children age 0 to 5 to make recommendations that address the needs of this population.

PSD has partnered with CYFD Early Childhood Services to provide Infant Mental Health teams to service families with infants in Dona Ana, Silver City, Luna, Santa Fe, and Albuquerque. PSD has continued to partner with early child hood services to offer training to PSD staff in specialty areas in the 0-5 population, such as offering staff training in Circle of Security Parenting, delivering that parenting curriculum to families, and sending PSD supervisors and managers to advanced clinical seminars. PSD partnered with the infant teams to present on infant and toddler issues at 2014 Children’s Law Institute meeting.

Over the past few years, PSD has initiated several practices to improve our ability to target services to those most at risk. This effort is most evident in terms of Promoting Safe and Stable Families (Title IV-B, Part 2) services and the PSD’s safety management practice. Beginning last project year and continuing this year, in
accord with the federal focus on services to children under age five (New Mexico’s focus is five and under), family support services are provided to parents and secondary caregivers who have a child age 0 to 5 who is at risk of abuse or neglect. Family support services are intended to work with families at risk of child maltreatment.

Children under the age of three who are subject of a substantiated report of child maltreatment, whether or not they enter PSD custody, are referred to the state’s early intervention program, Family Infant Toddler (FIT), for an assessment.

F. Services for Children Under Five

For state fiscal year 2014, quarter three there were 2163 children in care; of those, 937 (43.3%) were under age five.

PSD has developed a work group to review and revise policies and procedures for children 0 - 5. These policy and procedure changes will review timelines for hearings, permanency and services for this population. The “Survey of State Child Welfare Agency Initiatives for Maltreated Infants and Toddlers” will serve as a guide for the review and recommended changes.

PSD has been and will continue making several efforts to target services to this age group:

- **Family Support Services**: In an effort to target services to those at most risk, during the coming year family support services will be prioritized for parents and secondary caregivers who have a child age 0 to 5 who is at risk of abuse or neglect.
- **Safety Management**: A key factor in PSD’s safety assessment process is the vulnerability of the child, and the child’s age obviously enters into that assessment. Focusing on safety throughout the life of a case ensures that the safety of young, vulnerable children is considered.
- **Early Intervention**: Children under the age of three who are subject of a substantiated report of child maltreatment are referred to the state’s early intervention program, Family Infant Toddler (FIT), for an assessment.
- **CYFD Early Childhood Services**: Infants and children in PSD custody or at risk of coming into custody are often eligible for a range of services provided through CYFD’s Early Child Services Division and its contractors, including childcare, infant mental health services, pre-K programs, and home visiting.
- **Infant Mental Health Teams**: PSD is partnering with providers in pilot sites within the state to enhance the state’s workforce capacity (providers, PSD staff and foster parents) in terms of the provision of infant mental health services. PSD is working with the Early Childhood Division to identify more pilot sites and increase use and understanding of home visiting services in the state.
- **Neurosequential Model of Therapeutics**: PSD staff and foster parents have received training on the neurosequential model of therapeutics. This model is an approach that integrates core principles of brain development and the impact of trauma. This model has three components: training and capacity building, assessment and then, recommendations. Training and capacity building has occurred for approximately 30 individuals.

G. Services for Children Adopted From Other Countries

CYFD Protective Services Division (PSD) does not have a specific policy on re-homing of adopted children. However, if an inter-country adoptive family calls into statewide central intake for assistance, they are referred like all families for services that they qualify for and are appropriate to their situation. As with any adoptive family, inter-country adoptive families may access post adoption services through the FIESTA program funded by CYFD.
PSD will inform the Adoption Alliance Network, adoption agencies certified by CYFD, certified counselors and investigators of this new requirement to ensure the network is up to date with the processes PSD will put in place when an inter-country adoptive family comes to the attention of CYFD and the expectations of a placement agency or certified investigator/counselor when these families come to their attention.

If an inter-country adoptive family is in crisis or is in the process of a dissolution or disruption, comes to the attention of a placement agency or certified investigator/counselor, a referral notification with the family’s name, child’s name, number of children, agency name that handled the adoption, plans for the child as available, and the reason for the disruption or dissolution will be made to the Council on Accreditation (COA) at 212-797-3000 or haguecompliance@coanet.org and to Department of State at adoptionusca@state.gov

PSD will work with our information system to determine the best method to capture the data will be with inter-country adoptive families come to the attention of CYFD. PSD will encourage adoption agencies and certified counselors/investigators to track the number of families that come to their attention for reporting purposes.

If an inter-country adoption family comes to the attention of CYFD as being in crisis or are in the process of a dissolution or disruption, a referral notification will be made with the family’s name, child’s name, number of children, agency name that handled the adoption, plans for the child as available, and the reason for the disruption or dissolution to the Council on Accreditation(COA) at 212-797-3000 or haguecompliance@coanet.org and to Department of State at adoptionusca@state.gov
V. Consultation and Coordination Between States and Tribes

A. Input, Coordination and Collaboration From Tribes to Develop CFSP

The 2015-2019 plan was developed after a series of weekly meetings with stakeholders that occurred in April and May 2014. Tribal entities that were able to attend some of the meetings were: Navajo Nation, (Michele Jones), Pueblo of Zuni (Betty Nez) and Pueblo of Acoma (Donalyn Sarracino). Tribal input for our plan was obtained through our April and May 2014 stakeholder meetings and through the Title IV-B Tribal meeting that occurred in April 2014. After each stakeholder meeting notes were sent out through e-mail to be distributed for additional input and feedback. PSD utilized the Indian Affairs Department to assist in sending out invitations each of the tribes and pueblos for the PSD stakeholder meetings. The stake holder meetings were also advertised in the Indian Affairs Department’s newsletter in April and May of 2014. Below is a list of our tribal partners invited to the April and May 2014 stakeholder meetings:

<table>
<thead>
<tr>
<th>Tribe or Pueblo</th>
<th>Tribe or Pueblo Representative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pueblo of Acoma</td>
<td>Governor Fred S. Vallo, Sr, Donalyn Sarracino, Sharon Young</td>
</tr>
<tr>
<td>Pueblo of Cochiti</td>
<td>Governor Joseph H. Suina</td>
</tr>
<tr>
<td>Pueblo of Isleta</td>
<td>Governor E. Paul Torres, Caroline Darte</td>
</tr>
<tr>
<td>Pueblo of Jemez</td>
<td>Governor Joshua Madalena, Carla Sandia, Hennetta A. Gachupin</td>
</tr>
<tr>
<td>Pueblo of Laguna</td>
<td>Governor Richard B. Luarkie, Marie Alarid</td>
</tr>
<tr>
<td>Pueblo of Nambe</td>
<td>Governor Phillip A. Perez, Venus Mongofeds</td>
</tr>
<tr>
<td>Ohkay Owingeh</td>
<td>Governor Marcelino Aquino, Rodelle Thompson</td>
</tr>
<tr>
<td>Pueblo of Picuris</td>
<td>Governor Richard Mermojo</td>
</tr>
<tr>
<td>Pueblo of Pojoaque</td>
<td>Governor George Rivera</td>
</tr>
<tr>
<td>Pueblo of San Felipe</td>
<td>Governor Joseph E. Sandoval, Darlene J. Valencia</td>
</tr>
<tr>
<td>Pueblo of San Ildefonso</td>
<td>Governor Terry L. Aguilar, Sharon Serrano, Julie Sanchez</td>
</tr>
<tr>
<td>Pueblo of Sandia</td>
<td>Governor Stuart Paisano, Randall Berner, Kimberly Lorenzini</td>
</tr>
<tr>
<td>Pueblo of Santa Ana</td>
<td>Governor George M. Montoya, Nathan Tsosie</td>
</tr>
<tr>
<td>Pueblo of Santa Clara</td>
<td>Governor J. Michael Chavarria, Jacque Wright, Julie Bird, Terri Chavarria</td>
</tr>
<tr>
<td>Pueblo of Santo Domingo</td>
<td>Governor Oscar K. Lovato, Tori Garnat</td>
</tr>
<tr>
<td>Pueblo of Taos</td>
<td>Governor Clyde M. Romero, Ezra Bayles, Helena Concha</td>
</tr>
<tr>
<td>Pueblo of Tesuque</td>
<td>Governor Robert Mora, Sr., Jeannette Jagles</td>
</tr>
<tr>
<td>Pueblo of Zia</td>
<td>Governor David Pino, Victoria Herrera</td>
</tr>
<tr>
<td>Pueblo of Zuni</td>
<td>Governor Arlen P. Quetawski, Sr., Betty Nez, Marla Fastwolf</td>
</tr>
<tr>
<td>Jicarilla Apache Nation</td>
<td>President Ty Vicenti, Hilda Petago, Karen Keating, Susan Thompson, Rubesan Sandoval, Olivia Nelson, Violet Garcia</td>
</tr>
<tr>
<td>Mescalero Apache Tribe</td>
<td>President Danny Breuninger, Sr.</td>
</tr>
<tr>
<td>Navajo Nation</td>
<td>President Ben Shelly, Regina Yazzie, Irene Eldridge, Michele Jones</td>
</tr>
<tr>
<td>Navajo Nation Council</td>
<td>Johnny Naize</td>
</tr>
<tr>
<td>All Pueblo Council of Governors</td>
<td>Chairman Terry L. Aguilar (San Ildefonso Pueblo) and Secretary Vincent Toya, Sr. (Jemez Pueblo)</td>
</tr>
<tr>
<td>Five Sandoval Indian Pueblos</td>
<td>Director James Roger Madalena</td>
</tr>
<tr>
<td>Eight Northern Indian Pueblos Council</td>
<td>Executive Director Gil L. Vigil</td>
</tr>
<tr>
<td>Ramah Navajo</td>
<td>Vera Beaver, Loretta Martinez, Jemlisa Rapluit</td>
</tr>
<tr>
<td>Southern Ute</td>
<td>Ann Hale</td>
</tr>
</tbody>
</table>
Information obtained from the April and May 2014 stakeholder meetings and Title IV-B tribal meeting was utilized to develop PSD’s strengths, challenges and assisted in identifying goals for our Plan for Improvement. Over the next five years, PSD plans to hold monthly stakeholder meetings to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals.

PSD will share the CFSP with tribal partners through the Native American Liaison and tribal contacts. We will request a copy of each tribal CFSP directly through their governor or president and through our tribal liaison.

Opportunities for consultation also occurred throughout the year and involved formal public hearing and meetings, presentations at both the foster parent and annual Children’s Law Conferences as well as through our ongoing collaborations. Below are some opportunities PSD utilizes for collaboration and coordination of services with New Mexico tribal partners.

- Tribal-State Judicial Consortium – the purpose of the tribal consortium is to build closer relationships between the state and tribal courts and enhance communications. PSD attends quarterly meetings as an interested party. Subcommittees address state services for tribal children, full faith and credit, collaboration and compliance with ICWA.
- Indian Child Welfare Protection conference planning committee – conference coordinated in collaboration between CYFD, BIA, community partners and tribes around the state.
- PSD presentation at the yearly Tribal Title IV-B, includes presentations on Title IV-E, Chaffee funds, ETV funds and obtaining feedback from tribal partners.
- IGA’s – Ongoing discussions with PSD and tribes around the state to address the option of entering into an IGA that addresses tribal licensing. One goal of the IGA is to increase ICWA preferential placements by partnering with tribes to increase licensing of tribal foster families. Currently for a foster family to be licensed by a tribal entity, CYFD is required to enter into Intergovernmental agreements (IGA) with the tribe.
- Quarterly IGA meetings with Navajo Nation to discuss the roles and responsibilities of the Nation and the state for ensuring ICWA placement preference for Indian children.
- Quarterly ICWA staffings with Navajo Nations, so children outcomes can be achieved more timely.
- PSD notification to tribes when children come into care and ongoing partnering with the tribe during the time the child is in custody.
- IV-E unit provides ongoing collaboration, training and technical assistance with tribes, pueblos and the Nation in the area of IV-E.
- PSD partners with CCIC cross-training grant to ensure tribal representatives are invited to all training events and topics are relevant to tribal partners.
- PSD participates in the BIA-Tribal Social Services quarterly meetings on ICWA coordination issues and concerns in order to jointly address children and family issues.
- PSD utilizes our CYFD Native American liaison to assist in facilitation and mediation of some staffings, provide information to out of state tribes and assist with tribal requests for home studies for off reservation homes.
- PSD has identified a PSD Title IV-E staff person to be the designated primary contact for eligibility determinations, questions, consultations and technical assistance or training regarding children in tribal custody. Templates have also been developed for court orders in tribal court to incorporate the required language in the order to determine IV-E eligibility.
- Tribal youth are eligible for the same services under the Chafee Foster Care Independence Program and Education and Training Voucher Program as youth in the custody of the state.
Description of Understanding of Responsibility to Provide Child Welfare to Tribal Children

Compliance with the Indian Child Welfare Act (ICWA) is a high priority for PSD, CYFD, and the State of New Mexico. ICWA requirements are included in PSD policies in many places, including an extensive section in Legal Services and specific references and requirements in Investigation, Permanency Planning, and Adoption Act Regulations. The New Mexico Children’s Code incorporates the provisions of ICWA into state law. Specifically:

- **Notification of Indian parents and Tribes** of State proceedings involving Indian children and their right to intervene: PSD Intake Policy (8.10.2.14 NMAC); PSD Investigation Policy (8.10.3.15 NMAC; 8.10.3.16 NMAC); PSD Legal Services Policy (8.10.7.27 NMAC); NM Children’s Code Abuse & Neglect Act 32A-4-6 NMSA 1978 (Taking into custody), 32A-4-22 NMSA 1978 (Disposition of adjudicated abused or neglected child);

- **Placement preferences** of Indian children in foster care, pre-adoptive, and adoptive homes: PSD Legal Services Policy (8.10.7.27 NMAC); PSD Permanency Planning Policy (8.10.3.11 NMAC); PSD Adoption Act Regulations (8.26.3.44 NMAC); NM Children’s Code Abuse & Neglect Act 32A-4-9 NMSA 1978 (Indian child placement preferences), 32A-4-21 NMSA 1978 (Neglect or abuse predisposition studies...), 32A-4-22 NMSA 1978 (Disposition of adjudicated abused or neglected child); Children’s Code Adoptions Act 32A-5-4 NMSA 1978 (Application of federal Indian Child Welfare Act of 1978), 32A-5-5 NMSA 1978 (Indian child placement preferences);

- **Active efforts** to prevent the breakup of the Indian family when parties seek to place a child in foster care or for adoption: PSD Permanency Planning Policy (8.10.8.19 NMAC); NM Children’s Code Abuse & Neglect Act 32A-4-24 NMSA 1978 (Periodic Review of dispositional judgments), 32A-4-28 NMSA 1978 (Termination of parental rights; adoption decree), 32A-4-20 NMSA 1978 (Termination procedure); NM Children’s Code Adoptions Act 32A-5-4 NMSA 1978 (Application of federal Indian Child Welfare Act of 1978), 32A-5-5 NMSA 1978 (Indian child placement preferences);

- **Tribal right to intervene** in State proceedings or transfer proceedings to the jurisdiction of the tribe: PSD Legal Services Policy (8.10.7.27 NMAC); NM Children’s Code Abuse & Neglect Act 32A-4-6 NMSA 1978 (Taking into custody), 32A-4-27 NMSA 1978 (Intervention; persons permitted to intervene).

Ongoing Compliance with ICWA

ICWA compliance is documented in individual case records (in court reports, activities, narratives, etc.) and compliance data will be obtained through QA. PSD ensures compliance with ICWA through staff training, supervision, QA reviews and ongoing meetings with tribal representatives. PSD will continue to address ICWA compliance through training. ICWA is included in the legal module of foundations of practice. A 90-minute e-learning course, Introduction to ICWA, is also mandatory for all staff.

PSD will utilize data from QA Reviews, information obtained from our judicial partners, and information from meetings between PSD and tribal partners to improve or maintain our compliance with ICWA.

Discussions with Tribes Related to the CFSP

The 2015-2019 plan was developed after a series of weekly meetings with stakeholders that occurred in April and May 2014. Tribal entities that were able to attend some of the meetings were: Navajo Nation, Pueblo of Zuni and Pueblo of Acoma. One meeting specifically focused on youth services. Each year, the Youth Services Bureau staff also participate in the New Mexico tribal Title IV-B meeting. During this meeting youth services staff discuss the services available to tribal youth including ETV funds, transition support services, and foster youth tuition and fee waiver.
VI. Chafee Foster Care Independence Program (CFCIP)

A. Agency Administering CFCIP

The New Mexico Children, Youth and Families Department (CYFD), Protective Services Division (PSD), Youth Services Bureau directly administers, supervises, and oversees the Chafee Foster Care Independence Program (CFCIP). The Youth Services Bureau consists of the following personnel:

- Bureau Chief – Provides oversight and supervision for overall implementation of the program.
- Deputy Bureau Chief – Manages and coordinates the Education and Training Voucher (ETV) and Chafee program funds; tribal and out of state referrals; the annual Independent Living Conference; Leaders Uniting Voices Youth Advocates of New Mexico (LUVYANM); and develops and manages contracts with housing and life skill development providers.
- Eight Youth Transition Specialists (YTS) – Provides direct transition support services to individual youth across the state.
- Business Operations Specialist – Provides administrative support to staff and management of the Youth Services Bureau.

B. Description of Program Design and Delivery

There are seven primary components of the services delivered to youth who are likely to remain in care until age 18 that assist and support youth in their transition to self-sufficiency. These are:

1. **Independent Living (IL) Assessment:** The IL assessment is completed by the permanency planning worker (PPW) within 60 days of the youth’s turning 15 ½ years or within 60 days of the youth’s entry into foster care if the youth comes into care after the age of 15 ½. All youth, regardless of their permanency plan, complete the Casey Life Skills Assessment (CLSA) via the internet and are reassessed annually so that the youth and those that are involved in the youth’s life (PPW, foster parents, CASA, etc.) can work with the youth on developing the skills necessary to self-sufficiency as an adult. Specialized assessments are also available based on the youth’s individual needs such as the Pregnant and Parenting Assessment or the American Indian Assessment.

2. **Life Skills Development:** Any youth 16 years of age or older in foster care participates in life skills development, regardless of the youth’s permanency plan. Life skills development is an individualized process of learning the knowledge and skills necessary to be successful in living as an adult. Life skills may be acquired through a variety of methods including but not limited to group learning; taking advantage of teachable moments; use of community resources and mentors; self-paced or home base curricula; and individual practice with out-of-home providers. Life skills development is most effective when delivered through hands on, day to day participatory real life situations. In addition, the youth transition specialist obtains a credit report for each youth ages 16 and 17 in foster care. Through this process, the YTS assists the youth in understanding what their credit report is and assisting youth in disputing any erroneous information contained in their credit reports.

3. **Transition Planning Process:** Approximately three months prior to a youth’s 17th birthday, the youth transition specialist contacts the youth to schedule an informal pre-planning meeting for the youth’s transition plan. During this meeting, the YTS supports the youth in developing goals and plans for what will happen when the youth turns 18 years old and emancipates from the foster care system. The areas the plan focusses on include housing, employment and income resources, education, physical and behavioral
7. **Financial Resources:** Aside from the Education and Training Voucher program, there are three financial resources for which youth are eligible that support them in their transition to self-sufficient adulthood:

- **Start-Up Funds** are funds available through the Chafee Act to assist eligible youth in purchasing household items and services needed to establish a home or to support the youth’s transition into adulthood. Expenses which are eligible for the use of Start-Up funds are determined according to the standards of the Chafee Act. Youth must fill out an application to receive the funds and turn in receipts for purchases to ensure the funds are used appropriately. Youth who emancipated from the foster care system are eligible for these funds as are youth who were adopted after the age of 16. Adopted youth may not use the funds for room or board payments. Start-Up funds must be used by the youth’s 21st birthday.

- **Independent Living Placement Status (ILPS):** ILPS allows an eligible youth to receive a stipend based on substitute care monthly maintenance payments. The stipend payment allows the youth to live as a boarder with a foster parent or to live independently with limited supervision regarding safety and appropriate use of funds. Youth must refrain from substance use and illegal activity and provide documentation on a monthly basis as to their participation in activities such as employment or education that will support their successful transition to adulthood. ILPS is available to youth who are likely to emancipate from the foster care system starting at age 17 and extending to age 21.

- **Medicaid:** Medicaid is available to youth who have emancipated from the foster care system up to the age of 26 in accordance with the federal Affordable Care Act. Youth must fill out an application on an annual basis to ensure continued eligibility.

5. **Transition Support Services:** Transition support services are provided by the youth transition specialist for the purpose of preparing and assisting youth in their transition to adulthood. Services begin at the preparation for the transition meeting and may continue until the youth turns 21 years of age. Youth who are currently in foster care, youth who have emancipated from foster care, and youth who were adopted after the age of 16 are eligible for transition support services. Transition support services include, but are not limited to locating and maintaining safe and stable housing; identifying and accessing educational and vocational opportunities; information and referral on employment or income resources; referring youth to health and mental health services and ensuring enrollment in Medicaid; identifying local opportunity for mentors; linking youth with significant adult connections, prior to and after aging out of foster care; and accessing other continuing support services as available.

6. **Youth Leadership Skills:** Youth are engaged and empowered to participate in advocacy and policy making in multiple ways with CYFD. These include participating in Leaders Uniting Voices Youth Advocates of New Mexico (LUVYANM), planning and participating in the annual independent living youth conference, training of PSD workers, participating in policy meetings, public speaking at conferences such as the Children’s Law Institute and the foster parent conference, and advocacy work with the New Mexico legislature.

7. **Housing Services:** Youth services contracts with four housing programs across the state to assist youth in their ability to access affordable, safe, and stable housing. The housing programs are located in Santa Fe,
Albuquerque, Las Cruces, and Hobbs. Collectively these programs are able to serve up to 30 youth per year.

**Program Areas to Strengthen**

In consultation with the youth from LUVYANM, the youth identified five program areas that need enhancing or strengthening. These are life skill development services; affordable housing options; opportunities for mentors; vocational training and employment opportunities; and the transition planning process.

Over the next five years, the Youth Services Bureau will work on improving these areas through our collaborations and partnerships with both the youth we serve and community stakeholders such as the New Mexico Child Advocacy Network, the Heart Gallery of New Mexico, the Corrine Wolfe Children’s Law Center, and the Administrative Office of the Courts. These are described in detail in Section K below.

**Youth Involvement in the CFSP**

Each year at the annual independent living conference, LUVYANM conducts a town hall meeting with approximately 70 youth who participate to discuss issues that are most relevant to them. A summary of the discussion is developed and synthesized including recommendations for changes to youth services and the child welfare system as a whole. This information is being used to inform New Mexico’s state CFSP and CFCIP plan. LUVYANM members also provide feedback to CYFD and other stakeholders on an ongoing basis focused on areas of specific interest to those involved. For example, over the past year, LUVYANM members have provided information and feedback on topics including concurrent planning, trauma informed therapeutic services, design and implementation of transitional living programs, engaging youth in the court process, opening child welfare courts, and issues of well-being. Youth services gathered additional information in April and May 2014. LUVYANM reviewed a draft CFCIP plan and will receive a copy of the CFSP.

In developing goals for the ETV program, the most significant stakeholders are the youth themselves. Youth in the ETV program expressed overall satisfaction with the way the program is being implemented. The greatest challenges to the ETV program that are in need of goals and outcomes are the number of youth who are eligible for the program. This is largely due to the challenges in the New Mexico child welfare system with extremely low graduation rates (approximately 25-35%, depending on how it is measured) and difficulty in supporting youth in staying in school. In addition, over the last several years we have had substantially fewer youth emancipating from care—only 78 youth in FFY 2012 and 48 in FFY 2013. The goals for the ETV program are as follows:

1. Increase the number of youth utilizing the ETV funds each year.
2. Provide supportive services to youth while in college so that the youth stay in post-secondary education.

Youth Services will continue to use the annual independent living conference, LUVYANM, LUVYANM town hall, and meetings related to youth over the next five years to ensure the collection of high quality data.

**Informing Stakeholders of NYTD Data**

In May 2014, Youth services staff presented NYTD data to a group of stakeholders and to youth for the purpose of feedback for the CFSP. Stakeholders represented included PSD field staff and administration, school personnel, tribal representatives, and community-based service providers. Data points highlighted were: demographic information; life skill and financial services the youth received; percentages of youth adjudicated delinquent and those who receive special education services, aggregate outcome survey information on 17 and 19 year olds, percentages of youth receiving social security benefits; education levels; youth homelessness; referrals for substance abuse evaluation and treatment; incarceration rates; and rates of young parents.
**NYTD – Outcome Surveys**

Youth transition specialists are responsible for completing the outcome surveys with youth within 45 days at ages 17 and 19 and beginning in FFY 2015, those who are 21. The YTS will continually survey each age cohort for PSD to obtain the most data possible, as the population of youth who are emancipating from care is relatively small. On a weekly basis youth service workers receive a SACWIS report of all youth who are turning 17 while in care. In FFY 2013, youth transition specialists began receiving reports on a semi-annual basis of the 19 year old cohorts that were due for the follow up population. This too is an on-going process.

The surveys are completed preferably in a face-to-face interview utilizing Survey Monkey®. If it is not possible to do an in-person survey, the YTS conducts the survey via telephone. Youth are eligible for a financial incentive of $50 for participation in the survey. Staff are equipped with laptops and wireless hot-spots so the survey can be completed in different locations convenient for youth. In FFY 2014, PSD began using a version of the NYTD Plus survey to capture more data points that are relevant for planning and implementing services. This will more effectively meet the youths’ needs. The Youth Services Bureau in collaboration with the Research, Assessment, and Data Bureau analyze the survey data and share the data with interested stakeholders and youth as opportunities arise.

**NYTD – Services Data**

Service data is entered into the FACTS system by both youth services staff and permanency workers. An independent living window is created when a worker completes and uploads the Casey Life Skills Assessment. There is a dropdown menu for each domain of life skills and financial assistance in addition to a domain of “uncategorized services” which include life skills such as communication and decision-making. Within each life skill domain is another dropdown menu of descriptors so there is a potential ability to build a report identifying the specific life skill development services delivered. The worker can also enter a few sentences about the circumstances under which the life skill was delivered.

Housing and life skill development contractors provide data on a semi-annual basis on the services they provided to the protective services youth in their programs. This data is then entered by Youth Services staff into the FACTS system so that the services reports can be as accurate and complete as possible.

Youth Services staff will continue to report out on NYTD data at appropriate intervals and in appropriate settings such as conferences and stakeholder meetings. This will include analysis of the available data in the improvement of service delivery. Significant outcome data will not be available on the surveyed population until the end of FFY 2015 when there will be data from the 21 year old surveys.
Youth Services Across the State

Youth services has eight regional youth transition specialists that are located across the state and cover regions of up to seven counties. They are located in the following cities: Santa Fe, Rio Rancho, Las Vegas, Las Cruces, Roswell, Clovis and two in Albuquerque. Youth transition specialists are expected to collaborate and coordinate with the local county offices to ensure that all youth in New Mexico’s foster care system are able to receive the necessary services.

Variations in Service Delivery

NYTD services data reveal that in counties where a Youth Transition Specialist (YTS) is housed receive a higher number of life skill and financial assistance services than in counties where no Youth Transition Specialist is housed. On average, 66.7% of youth who live in counties where an YTS is housed receive life skill or financial assistance services whereas only 33.3% of youth who live in counties where an YTS is not housed, receive life skill development services. This makes it twice as likely that youth who live in “YTS counties” will receive services as those who do not live in “YTS counties”. This data is consistent across all domains of life skill and financial assistance.

Serving Youth of Various Ages and States Achieving Independence

Youth Under Age 16 – Prior to age 15½, youth in New Mexico typically do not receive youth services, although they may participate in the Independent Living Youth Conference on a case by case basis. At age 15½, youth are referred for an independent living assessment utilizing the Casey Life Skills Assessment (www.caseylifeskills.org). A copy of the assessment results are uploaded into the FACTS system and is attached to the court report for the first permanency hearing. The PPW and out-of-home providers work with the youth on developing life skills based on the needs identified in the assessment. Youth are also able to attend various life skills events and groups in the areas in which they live. At 15½, the YTS also receives an automatic secondary assignment to a youth’s case in FACTS.

Youth Ages 16 to 18 – Between ages 16 and 18, youth begin the transition planning process, regardless of their permanency plan. Initially, the youth meets with the youth transition specialist, typically by themselves or occasionally with their PPW or foster parents to begin the process of developing a plan for when they emancipate from foster care. This informal meeting determines who the youth would like to have at their formal transition meeting; the youth’s plans for housing, education, employment, and supportive services; and to provide information about their rights, responsibilities, and services they are eligible for through youth services. The formal youth transition meeting occurs prior to the youth’s 17th birthday and is attached to the court report to be presented to the court at the first permanency hearing after the youth’s 17th birthday. The PPW and the YTS work collaboratively during this time to ensure that all the action steps necessary to achieve the plan are completed prior to the youth’s emancipation from care. The plan is revisited 30 to 60 days prior to the youth’s 18th birthday to ensure that the plan still meets the youth’s needs and to revise any areas as necessary.

During this time, youth begin to more actively engage in life skills development activities and youth leadership activities with their PPW, YTS, out-of-home care providers, and community service providers. Youth receive limited transition support services, as the PPW remains their primary worker. At age 17, youth become eligible to participate in the various housing programs and are eligible to begin receiving a stipend if they wish to live in a semi-independent living situation. This requires that the PPW verifies the youth has the skills to live safely in the living situation, that the home is safe, and that it is unlikely that the youth will be exploited.

Youth ages 18 to 20 – In the current foster care system, youth are not eligible to remain in foster care beyond age 18. Once a youth emancipates from the foster care system, the YTS becomes their primary worker and the PPW closes out her assignment to the case. At age 18, all youth who do not have Medicaid through another
means (such as through Social Security benefits) are eligible for Medicaid through the Affordable Care Act. The youth must fill out a form one time per year with the assigned YTS in order to update their contact information. If a youth does not receive social security benefits they are eligible for a stipend to encourage success in school or work activities. At age 18, youth are also eligible for Start-Up funds and Education and Training Vouchers if the youth has completed high school or gotten their GED, are enrolled in post-secondary education, and meet the other criteria set out in ETV regulations. Youth continue to develop their life skills, participate in youth leadership activities, receive transition support services and continue to be eligible to participate in housing programs.

**Youth who were adopted after age 16** – Youth who have been adopted after the age of 16 are eligible for transition support services, youth leadership activities, life skill development services, and ETV as long as they meet the other eligibility criteria for ETV. Youth who were adopted after the age of 16 are also eligible for Start-Up funds, although they may not use Start-Up funds for room and board payments. It is rare in PSD that youth leave foster care for kinship guardianship as it is not a subsidized permanency arrangement, therefore, youth who leave foster care after age 16 for kinship guardianships are not eligible for services.

**Assessment Tools**
PSD does not use any particular tool to identify youth who are likely to emancipate or remain in care for longer periods of time. PSD utilizes the Casey Life Skills Assessment (CLSA) and other assessments through the Casey website (www.caseylifeskills.org) to identify developmental levels particularly on life skills and perceptions of permanency. The CLSA is then repeated on an annual basis to assess the level of skills attained by youth while in PSD custody.

**Administrative Barriers**
No administrative or statutory barriers have been identified that impede the state’s ability to serve a broad range of youth.

**Room and Board**
PSD defines room as “payment of rent or mortgage”. The definition of board is “payment for food”. PSD has two primary means to pay for room and board for youth between the ages of 18 and 20. The first is through Start-Up funds. These are funds available through the Chafee Act to assist eligible youth in purchasing the household items and/or services needed to establish a home or to support the youth’s transition into adulthood. Expenses which are eligible for the use of Start-Up funds are determined according to the standards of the Chafee Act and among these are room and board payments. The second is through the housing and life skill development contracts throughout PSD. The contractors assist youth in paying for rent and food among other items to support the youth in their transition to successful adulthood.

The issue of safe, stable, and affordable housing is an issue that youth identified as a program area that is in need of strengthening. In the plan described above, PSD will examine how it utilizes the Chafee funds spent on room and board and in FY 2016 will revise the approach while still maintaining a limit of 30 percent of the Chafee funds being spent on room and board.

**Collaboration with Other Private and Public Agencies**

**Helping Adolescents Achieve Independence**
There are three agencies or organizations PSD regularly partners to support youth in achieving self-sufficiency. These include: New Mexico Child Advocacy Networks (NMCAN), Heart Gallery of New Mexico Foundation, and the Juvenile Justice Division of CYFD.

NMCAN is the lead agency for the Jim Casey Youth Initiative in New Mexico. They have initiated the Opportunity Passport™ program, a matched savings program (Individual Development Accounts) with
intensive financial literacy training. To date approximately 12 youth have started this program with more participating in the coming years. In addition, the project spearheaded the Foster Child Tuition and Fee Waiver in the legislature this year, enabling foster youth to attend any New Mexico college or university without having to pay tuition or fees. Currently the project is working in collaboration with the Children’s Court Improvement Commission (CCIC) to improve youth participation in their court hearings and support children’s court judges in learning best practices around youth in court. NMCAN also houses the Building Futures and Foundations (BFF) mentoring program. BFF trains and matches volunteer mentors in the Albuquerque metro area to older youth in foster care. Since its inception in 2010, BFF has matched approximately 40 youth with volunteer mentors. Finally, NMCAN is partnering with the Annie E. Casey Foundation to promote success in post-secondary education. In this project they are working with Albuquerque area colleges and universities to ensure that foster care youth are able to obtain the necessary skills and supports to be successful in their college careers.

The Heart Gallery assists PSD foster youth achieve independence in a number of ways. Youth can make requests for financial assistance for items for which there is no other payer source such as high school graduation costs, GED fees, driver’s education, and other items needed by youth. They have partnered with Mattress Firm to provide a queen mattress and box spring set to each youth who emancipates from care in New Mexico. They have partnered with Comcast to support an annual toiletries and personal care items drive so that youth can access supplies such as toilet paper, shampoo, toothbrushes, and razors for free. Heart Gallery maintains a storage unit called the “Hope Chest” that contains donated furniture and household items that youth can access to set up their own apartments. Heart Gallery have partnered with businesses in the Albuquerque area to identify internships and apprenticeships for youth for employment. The Heart Gallery is working with CASA in the Albuquerque area to develop an educational advocacy pilot program, as recommended from the independent living youth conference’s town hall meeting.

The Juvenile Justice Division (JJD) of CYFD has a similar program to PSD’s Youth Services Bureau for youth who are transitioning out of juvenile justice facilities on supervised release, particularly for those youth with significant behavioral health needs. Prior to the youth exiting the facility, youth services staff partner with Juvenile Justice staff on multi-disciplinary team meetings and on coordinating services once the youth has exited the facility. This ensures youth who may be at the highest risk for on-going challenges have access to the most comprehensive and appropriate supports possible to address their transition needs.

Coordination with Other Programs Serving Youth

The Youth Services Bureau contracts with four transitional living programs across the state to provide housing and life skill development services to protective services and tribal youth. These include: Youth Shelters in Santa Fe; A New Day in Albuquerque; Families and Youth, Inc. in Las Cruces; and Guidance Center of Lea County in Hobbs. Although there is no contractual relationship, youth services collaborates with Dreamtree Project in Taos and Youth Development, Inc. in Albuquerque.

In addition to the transitional living programs youth services partners with the CYFD Office of Behavioral Health to provide supportive housing services to youth emancipating from PSD custody. This program has been in effect for approximately seven years and is very successful in providing housing options for youth in the Albuquerque area. This project has also been able to access preference points for youth participating in the supportive housing program with the Albuquerque Housing Authority so that youth may access Section 8 housing in a relatively timely manner.

PSD coordinates with the Developmental Disability Services Division of the Department of Health to access the Developmental Disability (DD) Waiver for youth who qualify. Typically there is an approximate ten year wait list to receive DD Waiver services. Over the last seven years, PSD has developed a system so that youth who are eligible for DD Waiver services are able to access an expedited allocation assuming they still continue to qualify for the program and have exhausted all other resources. This has helped many severely disabled youth access services when there are no other options for their care.
Affordable Care Act (Medicaid to 26)
On January 1, 2014 PSD met with representatives from Medicaid to propose that CYFD continue to manage the process of enrolling youth who emancipate from care in Medicaid. This has been put into place and is entered into the SACWIS system. Medicaid staff continue to determine Medicaid for youth moving from other states to New Mexico.

Reducing the Risk of Human Trafficking
New Mexico has not yet undertaken concerted efforts to address human trafficking. However, some of the common components identified with human trafficking such as large numbers of youth in congregate care settings or large numbers of youth emancipating from care, are not as significant an issue in New Mexico as they appear to be in other states.

Determining Eligibility for Benefits and Services
All youth who emancipate from PSD at age 18 are eligible for the services and benefits described in this plan. All youth who emancipate from one of the 22 New Mexico tribes and pueblos foster care system are also eligible for all the benefits and services described in this plan. Youth who emancipate from foster care in other states and move to New Mexico are eligible for all the benefits and services that are available to New Mexico youth with the exception of Medicaid through the foster youth provision of the Affordable Care Act. Those youth are likely to be eligible for Medicaid through the Medicaid expansion of the Affordable Care Act and staff are able to assist youth in applying for Medicaid through the Income Support Division of the Human Services Department. Youth who were adopted from foster care after the age of 16 in New Mexico or from the tribes and pueblos in New Mexico, and youth who were adopted from foster care in another state after the age of 16 are all eligible for the services described in this plan.

Cooperation in National Evaluations
PSD and Youth Services Bureau will cooperate in any national evaluation of the effects of the program in achieving the purposes of CFCIP.

Describe Methods Used to Operate ETV Funds Efficiently
Eligibility
Each youth must provide documentation of the completion of the Free Application for Federal Student Aid (FAFSA); proof of enrollment in an accredited post-secondary education institution or accredited vocational education institution; and proof of academic progress (if the youth has completed more than one semester of education) to the deputy bureau chief to ensure eligibility. To maintain eligibility, a youth must maintain a GPA of 2.0 or higher. If, at any point, the youth’s cumulative GPA drops below a 2.0, the youth develops an academic improvement plan with support from the YTS to identify resources, goals, and plans to assist the youth to improve academic performance.

Application
The YTS supports the youth in completing a simple two page application, attaches the necessary supporting documentation and submits the application to the deputy bureau chief. Complete applications are processed utilizing a fiscal agent each week and it takes approximately two weeks for a check or gift card to be returned to the YTS.
Receipts and Fiscal Accountability

All receipts for items and services purchased with ETV funds must be submitted to the deputy bureau chief. If the item was purchased with a gift card, the youth must also submit the used gift card. This is done to prevent inappropriate or fraudulent use of the federal funds. If a youth loses the receipt or is unable to produce one, the youth must make a repayment of the funds used. Currently, approximately 91 percent of receipts have been submitted for FY 2014.

Methods Used to Ensure Total Amount Does Not Exceed Total Cost of Attendance (ETV) & how PSD Avoids Duplication of ETV Benefits

Youth Services Bureau maintains an Excel spreadsheet that contains information regarding ETV utilization including unduplicated youth receiving the funds. A hand count is performed of the number of youth who receive funds. Each youth is identified on the spreadsheet as to whether he or she is a tribal youth to accurately report the number of tribal youth who receive ETV funds.

Each time a youth submits an application for ETV funds, they must submit a statement of the cost of attendance from their educational institution as well as a statement of their financial aid award. The financial aid award is subtracted from the total cost of attendance to determine the unmet need of the student. The youth is eligible for up to $5000 or the unmet need from the Cost of Attendance, whichever is less. This ensures youth are not receiving a duplication of benefits under the ETV program.

Consultation with Tribes on ETV

All services provided to New Mexico youth under CFCIP are available to eligible youth who were under tribal social services custody. The referral for services can come from any source including community service providers, schools, or the tribes themselves. Prior to this past year, Youth Services received such requests for services for one or two youth each year. This past year, Youth Services has received referrals for 13 eligible tribal youth representing five of the 22 tribes and pueblos in New Mexico.

Each year, the Youth Services Bureau staff participate in the New Mexico tribal IV-B meeting. During this meeting youth services staff discuss the services available to youth who emancipate from the tribal social services systems. This includes information on ETV funds, transition support services, and the new Foster Youth Tuition and Fee Waiver passed in the 2014 legislative session.

Youth Services staff ensure copies of referral forms, updates on changes to the program, and updated contact information are provided to tribal social services. This information is also provided upon the tribe or community service providers’ request. All CFCIP services are offered on an equal basis to youth who emancipate from CYFD custody or tribal custody or to those who were adopted after the age of 16. (See Section VI - Chafee Foster Care Independence Program section B - Description of Program Design and Delivery for a more detailed description of the CFCIP program design and delivery.) All of these services are provided to eligible tribal youth.

At this time, no tribe has requested to develop an agreement to administer, supervise, or oversee the CFCIP or ETV program with respect to eligible Indian children or to receive an appropriate portion of the state’s allotment for such administration or supervision.

Over the next five years Youth Services will explore methods in increasing collaboration to improve consultation and coordination of youth services.
Youth and stakeholders identified five CFCIP program areas to strengthen over the coming five years. Below is a table describing the efforts which will be undertaken to address the identified needs in these areas:

<table>
<thead>
<tr>
<th>Year(s)</th>
<th>Program Area of Focus – Identified Program Challenges</th>
<th>Plan for Strengthening the Program Area</th>
</tr>
</thead>
</table>
| FY 2015 | **Life Skill Development Services:** Youth report that they need more life skill development services prior to emancipating from care to prepare for the challenges they face when they transition to adulthood. | • Develop regional teams made up of youth, foster parents, service providers, permanency workers, and youth transition specialists to identify life skill priority areas and timelines for development and delivery of life skill services.  
• Evaluate process and programs to determine efficacy.  
• Revise youth services policy and procedures related to life skill development services. |
| FY 2015 | **Transition Planning Process:** Youth report that the process is overwhelming, confusing, and not as engaging as it needs to be. In addition, one Children’s Court Judge reported that he was concerned that the transition plans were more focused on what the adults on the youth’s team think should happen rather than what the youth wants to have happen. YTS’s agree that often youth create a plan based on what they believe the adults want to hear as opposed to what they really want to have happen. | • Utilize an adaptive leadership approach within the Youth Services Bureau to develop experiments to identify what works and what doesn’t work in the planning process.  
• Review best practices and literature related to transition planning for youth emancipating from child welfare systems across the country.  
• Evaluate outcomes of experiments to identify the most effective means of conducting transition planning.  
• Revise youth services policy and procedures to reflect changes in practice as they are developed through the adaptive leadership process. |
| FY 2016 | **Affordable Housing Options:** Youth report that there are simply not enough affordable housing options for them when they emancipate from care. Often the living situations they are able to identify are unstable (living with roommates, family members, etc.) and fall apart quickly. Currently, youth services is in the second year of a four year RFP cycle for housing programs. | • Complete site reviews and program audits of housing services through the current set of contracts.  
• Conduct focus groups with youth and other stakeholders about what would be most helpful to them related to housing services.  
• Either develop a new RFP or identify other ways in which to use the funds for housing services.  
• Identify next steps to develop housing supports that will meet the youths’ needs for safe and affordable housing services. |
| FY 2017 | **Opportunities for Mentors:** When reviewing NYTD service data, the youth identified that only approximately ten percent of youth participate in a formal mentoring program. The youth described this as “sad” because those youth who have mentors find it so helpful. | • Identify regions of the state that may have the conditions necessary to support and sustain a mentoring program.  
• Partner with the New Mexico Child Advocacy Network’s Building Futures and Foundations program to support the development of a program like this in the identified communities.  
• Evaluate the effectiveness of the program in meeting the needs of youth. |
| FY 2018 | **Vocational Training and Employment Opportunities:** Youth report that they often have difficulty finding jobs in their communities. In addition, youth | • Identify communities in which there is the greatest need for career-based training programs.  
• Develop partnerships with programs (such as Workforce Investment Act, YouthBuild, Americorps, etc.) and |
need career training opportunities, especially if higher education is not something that works for them.

- Partner with foundations such as the Heart Gallery of New Mexico and community-based service providers to develop opportunities for youth in various communities across the state.
- Evaluate the effectiveness of the initiative based on the numbers of youth who participate and the outcomes of the programs they participated in.

**CFCIP Training (include ETV)**

One half day of PSD’s foundations of practice training is focused on youth and the services that the Youth Services Bureau provides. This training includes information: positive youth development; the importance of permanency for older youth with a particular emphasis on relational permanency and biological family connections; special issues of working with youth including sexual orientation and pregnant and parenting youth; and the services for which youth are eligible.

Currently, there is no other specific CFCIP training that is planned in the coming five years.
VII. Monthly Caseworker Visits

Current PSD policy requires that the caseworker visit each child in custody in his/her placement at least monthly and assess the placement for appropriateness in meeting the child’s needs and safety. PSD has annually exceeded its goals, reporting 98% of children are visited each month in custody over the past two federal fiscal years. Results of the Round 2 CFSR onsite finds that Item 19 was rated as a strength in 88% of the cases (foster care and in-home). PSD will continue to closely monitor monthly caseworker visits with children in custody.

Data Collection Methodology

Modifications to the FACTS data system (SACWIS), enabled caseworkers to enter the date and location of visits with the child. Narrative sections can be used to document the content and outcomes of each visit. PSD developed management information reports to run on a monthly, quarterly and annual basis to be able to meet reporting requirements and provide for the automatic calculation of percentages in accordance with ACYF-CB-PI-07-08.

Standards for the Content and Frequency of Case Worker Visits

Current PSD policy requires that the caseworker visit each child in custody in his/her placement at least monthly and assess the placement for appropriateness in meeting the child’s needs and safety. Visitation Guidelines and a corresponding visitation checklist provide specific information to case workers about the nature and content of the visitation and includes guidance as to the information to be obtained from and shared with the child during each visitation.

Activities that are planned to support monthly caseworker visits with children in foster care include:

1. Continue monitoring and managing the monthly, quarterly and annual caseworker visits management reports. These reports produce data regarding the frequency and location of visits.
2. Utilize the supervisory case review instruments to monitor the occurrence and quality of caseworker visits with children in custody.
3. Utilize the benefits of technology to improve caseworker ability to conduct monthly worker-child visits. The technology enables case workers to dictate from any location using a cell phone information related to case work activities, thereby making more time for them to conduct face-to-face visitation with the child in the child’s place of residence.

PSD utilizes the Monthly Caseworker Visit Grant funds to assist workers with documentation. This is accomplished through funding of a transcription and dictation service called SpeakWrite. In FY14 PSD will expend $247,192 ($168,091 federal funds and $79,101 in state general funds) in this program. In FY15 PSD will expend $250,000 ($181,100 federal funds and $68,900 state general funds) in this program.
VIII. Adoption Incentive Payments

Over the past few years, New Mexico’s adoption incentive payments have been directed to enhance recruitment and provide support for foster-adoptive and adoptive parents. The majority of the funds have been utilized to maintain the foster parent liaisons each year in supporting foster and adoptive parents. Other items purchased were supplies and equipment for the production of recruitment materials, materials to be used to identify and recruit adoptive homes and promote foster parent conversions, and enhancements to electronic management information system to be better able to collect and process information about children waiting for adoptive homes and eligible families. Funds have also been utilized to purchase media to raise awareness for the need of foster homes across the state. In addition, PSD has used the funding to improve child specific recruitment capabilities on the CYFD website and for targeted recruitment of foster families in areas of most need, including recruitment of homes that will foster/adopt older youth and sibling groups.

In FY14, PSD will continue to fund foster parent liaisons to support foster parents and will continue to do targeted marketing in areas of greatest need of additional foster parents. We will purchase promotional materials to assist in recruitment efforts statewide. After 2014, PSD does not expect to receive future Adoption Incentive funds.

IX. Child Welfare Waiver Demonstration Activities

New Mexico Is Not Involved in Any Child Welfare Waiver Demonstration Activities.
X. Targeted Plans within CFSP

A. Foster and Adoptive Parent Diligent Recruitment Plan

PSD continues to make steady progress in terms of recruitment and retention of foster and adoptive parents. PSD has implemented the pre-service training, Relative, Adoptive, and Foster Parent Training (RAFT) statewide. PSD offers annual mandated recertification training and trainings on different topics to foster parents on an ongoing basis.

PSD values foster and adoptive parent and sought their input and ideas in developing and implementing PSD foster and adoptive parent recruitment plan. PSD conducted meetings in the five regions of the state to gather input for the Diligent Recruitment (DR) Plan. PSD staff, foster and adoptive parents, foster parent liaisons, and community stakeholders that serve foster and adoptive families statewide participated in these meetings. PSD utilized the DR Navigator developed by the National Resource Center for Diligent Recruitment at AdoptUSKids and PSD data reports to assist in the development of the DR plan. PSD compared the number of children in care by county and ethnicity in each region and number of active foster and adoptive providers by county and ethnicity in each region. Data collected from the statewide customer service surveys completed in 2011 and 2013 was also reviewed. The purpose of the comparative surveys was to gain insight on factors that relate to retention and foster parents did not complete the application process and to assess the levels of foster parent satisfaction with PSD. The most recent customer service satisfaction survey results from the five Step Up! transformation zones were reviewed as well.

The following strengths and challenges information was obtained from the 2014 stakeholder meetings, foster parent listening tours, and foster parent surveys. PSD in collaboration with present stakeholders identified strengths, challenges and requested assistance in identifying goals for our Plan for Improvement. Specific elements, challenges and strategies for the foster and adoptive parent diligent recruitment plan are presented below.

Diligent Recruitment Plan Elements and Strategies

Element 1: Characteristics of the children for whom foster and adoptive homes are needed:

Strengths
- PSD completes ongoing data collection to gather and update the characteristics of children in care, including age, gender, membership of a sibling group, race, ethnicity, tribal affiliation, census number, number of placements while in foster care.
- Training to prospective foster and adoptive parents regarding the characteristics, needs, and issues of children who have experienced trauma is provided on an annual basis.
- Foster and adoptive parents receive annual recertification training, and provided additional opportunities to enhance their skills throughout the year. Training topics have included trauma informed components, skills and tools for children and families.
- PSD has emphasizes trauma informed care for foster and adoptive families. Trainings are skill based and offered to all providers statewide. Certified trainers are available to train foster parents as needed.
- Trainings were translated and delivered in Spanish to our monolingual and bilingual Spanish speaking families.
- RAFT is available statewide and offered in some counties in Spanish.

Challenges
- The data collection is not always gathered or entered timely in the data information system.
The information system captures data that duplicates licenses, therefore skewing the actual number of foster and adoptive families available.

- Staff lack understanding or education about data application in recruitment.
- Staff do not always utilize data when recruiting foster and adoptive families.
- Lack of bilingual staff to offer the supportive services to foster and adoptive families.
- Budget constraints are a barrier in translating curriculum.
- RAFT in Spanish is not offered in every community.

**Strategies**

- PSD continues to receive technical assistance from the National Resource Center for Diligent Recruitment at AdoptUSKids to learn about general, targeted and child specific recruitment.
- Targeted recruitment plans were developed and will be implemented in the five transformation zones identified in the Step Up! Project. Recruitment plans are data driven and include the following elements: types and total of number of foster families needed, capacity, the number of concurrent homes available and additional factors such as families’ location, race, ethnicity, and language. Targeted recruitment plans will look at the source of recruitment, track families through the process, track the utilization of families after licensing and track the number of families retained after placement.
- PSD will continue to collaborate with community partners on targeted recruitment efforts in the faith based community.
- PSD will continue general recruitment to raise public awareness about the need for foster and adoptive families and provide a positive view of foster care and adoption in NM.
- PSD will continue child specific recruitment to find adoptive homes for waiting children. Resources such as registration through the Adoption Exchange, AdoptUSKids, Heart Gallery program and CYFD photo listings will be utilized for all children in care without a resource.
- PSD will continue partnering with New Mexico State University to continually look at the funding stream and ensure translation services are supported.

**Element 2: Specific strategies to reach out to all parts of the community**

**Strengths**

- PSD obtains data on an ongoing basis to update the characteristics of children in care, including age, gender, membership of a sibling group, race, ethnicity, tribal affiliation, census number, number of placements while in foster care.
- Data collected informs PSD who the foster care population is, helps us take an active approach to recruitment and retention and helps us understand where to direct recruitment efforts.
- PSD provides post-decree family support services through the FIESTA Program. This statewide program includes Family activities, Information, Education, Support groups and Training for Adoptive families.
- In most PSD counties, Foster Parent Liaisons are available by contract to help support foster and adoptive families.
- PSD has created a partnership with the Aspen Project and faith based recruitment is ongoing.
- PSD has a partnership with the Office of African American Affairs to assist with general and child specific recruitment activities.
PSD has a partnership with various pueblos and Navajo Nation to collaborate with recruitment of Native American foster and adoptive homes.

PSD recruitment materials are available in Spanish and feature families that reflect the ethnic and racial diversity of the children in care.

**Challenges**
- PSD is currently receiving support to have a closed group and access to a Facebook page, however, sustainability and maintenance after the DR grant ends is not clearly defined.
- PSD Spanish speaking materials are not always readily available to families or workers and bilingual staff are not always able to deliver a curriculum in Spanish.
- PSD smaller counties have difficulty locating and maintaining foster parent liaisons.
- PSD continues to be challenged in recruitment and retention of Native American foster families.
- PSD has an insufficient number of recruitment specialists to serve the geographical size of the state.

**Strategies:**
- PSD foster parent liaison contracts have been revised to emphasize the support role of the liaison for foster parents. Key elements of diligent recruitment in the Step Up! activities have also been incorporated into the contracts.
- PSD will continue to support the FIESTA contract and learn about foster and adoptive family’s needs to assist in providing post adoption support.
- PSD regional recruitment specialists will be decentralized and supervised within each region to better serve the recruitment needs of the counties within each region. This will assist with county ownership and shared responsibility of recruitment and retention of foster and adoptive families.
- PSD will continue to educate individuals about the CYFD Facebook.
- PSD will explore sustainability strategies to support the use of a Facebook group for foster parents similar to FIESTA.
- PSD will develop partnerships with other religious organizations.
- PSD will utilize the NM Office of African American Affairs to reach out to members for information and dissemination of foster care needs in New Mexico.
- PSD will partner with the CYFD Native American liaison, BIA, Navajo Nation and pueblos to develop recruitment and retention strategies for Native American homes.

**Element 3: Diverse method of dissemination both general information about being a foster and adoptive parent and child specific information:**

**Strengths**
- PSD has made a major philosophical shift in how foster and adoptive parents are viewed. We believe foster and adoptive parents are partners with a common interest or goal of the welfare of children and their families.
- PSD customer service standards and competencies are incorporated in our training for all of CYFD staff.
- PSD developed a new Concurrent Planning Model that is being tested in five transformation zones. The training curriculum is co trained with a foster parent.
- PSD will continue general recruitment to raise public awareness about the need for foster and adoptive families and provide a positive view of foster care and adoption in NM.
Challenges

- PSD has more children in care than concurrent homes available for the children.
- PSD needs to enhance the analysis of the current pool of available foster and adoptive placement resources.
- PSD needs to recruit and license additional concurrent planning homes, including relative homes.
- PSD needs to recruit and license foster and adoptive homes for siblings in care so sibling groups can be placed together.
- PSD will continue to support foster families to ensure children and youth are maintained in their schools when placed in foster care.

Strategies

- PSD will continue to test and implement targeted recruitment plans in the five transformation zones utilizing data to measure.
- PSD will continue child-specific recruitment utilizing Adoption Exchanges, Wendy’s Wonderful Kids, Wednesday’s Child, Adoption Columns, AdoptUSkids, Heart Gallery Program, CYFD website and Facebook page.
- PSD will continue all ages adoption and teen events.
- PSD will continue to utilize customer service satisfaction surveys to help inform us about areas of focus for foster parents.
- PSD will conduct focus groups with foster and adoptive parents to assess the effectiveness of our strategies.
- PSD will continue to support customer service work plans.

Element 4: Strategies for assuring that all prospective foster/adoptive parents have access to agencies that license/approve foster/adoptive parents, including location and hours of services so that the agencies can be accessed by all members of the community:

Strengths

- PSD posts all foster and adoptive parent informational meetings and RAFT training schedules on the CYFD website and regularly updates the information.
- PSD provides informational meetings and trainings after hours and weekends.
- PSD provides home study contracts statewide and contractors meet with families at times convenient for them.

Challenges

- RAFT is designed to be offered completed in an eight hour block of time and on Saturdays. This schedule does not work for all families.
- Child care for prospective foster and adoptive families is a barrier.
- Home study contractors may conduct home visits back to back, which doesn’t allow a family to process the materials.
- Perspective foster and adoptive families find the SAFE home study to be too personal and intrusive. This has especially been seen in our Native American community.

Strategies
• PSD and NMSU continue to work together to develop training methods that work for families. PSD will be looking into a blended learning method for RAFT trainings.
• PSD will coordinate RAFT and Informational meetings to be offered in venues other than government buildings to accommodate specific groups, i.e. church members, major employers, and targeted schools.

Element 5: Strategies for training staff to work with diverse communities including cultural, racial, and socio-economic variations;

Strengths:
• SAFE Home study format is available in Spanish for staff and contractors to utilize.
• PSD staff participate in trainings such as “Knowing Who You Are” to explore their attitudes and increase awareness of other’s worldviews.
• PSD staff participate in trainings and conferences throughout the year with an emphasis on cultural competence such as the Children’s Law Institute and ICWA conference.
• PSD Piñon Practice Model holds the value of cultural competency; taking into account family traditions, language, and cultural identity.
• PSD general recruitment materials reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed.
• PSD general recruitment materials reflect several types of families that incorporates the LGBTQ community, single parents and non-traditional families throughout the state of New Mexico.
• PSD staff participate in recruitment efforts at various events in the state, such as PRIDE Fests, festivals, fairs, and Pow Wows amongst many others.

Challenges
• PSD struggles statewide with high vacancy rates.
• PSD has high staff turnover in rural and tribal areas of the state.
• PSD staff in the rural or tribal areas are not always of the same cultural background or speak the language, thus creating a linguistic and cultural challenge for families.

Strategies
• PSD will continue to collaborate with the Consortium for Children to discuss cultural barriers when completing the interview process with families.
• PSD will continue to obtain technical assistance from the Consortium for Children for home study writers within PSD, child placement agencies and private contractors.
• PSD will continue to provide SAFE training through PSD staff, contractors and child placement agencies via PSD trainers and Consortium for Children.
• PSD will provide yearly relevant cultural trainings to staff.
• PSD will develop procedures or protocols for staff to engage effectively with diverse cultural, racial, and economic communities who are reflective of the children and youth in foster care.
• PSD will continue to support the utilization of the Piñon practice model values and principles and customer service model when responding to prospective foster and adoptive parents. This will assist in reducing the number of foster parents who leave the system.
PSD will continue to collaborate with CYFD Academy for Training and Professional Development in development of trainings that incorporate the values and principles as defined in the practice model and customer service model.

**Element 6: Strategies to address linguistic barriers**

**Strengths**
- PSD recognizes the need to remove linguistic barriers, CYFD utilizes a multi-lingual pay system for those that serve as interpreters and translators in the CYFD.
- PSD provides RAFT training in Spanish in some communities.
- PSD provides foster parent mandated training in Spanish in several communities. This supports the customer service model value, principle standards and competencies.
- PSD provides services and forms in Spanish to families.

**Challenges**
- PSD has no certification requirement to accurately identify interpreters and translators.
- PSD struggles with consistent funding for translation services.
- PSD is not always able to access interpretation services for the deaf or hard of hearing prospective foster or adoptive families.

**Strategies**
- PSD and New Mexico State University, our training partner are committed to removing barriers and ensure funds for translation services are available.
- PSD is in the process of translating foster parent forms.
- PSD will distribute Spanish books to each county office for foster children, foster parents or family resource coordinators to access.
- PSD will utilize the immigration liaison to speak with families who need assistance and facilitate the process with Home Land Security when applying for adjusted status for children in care.
- PSD will discuss steps needed to ensure interpretation and translation services are available for prospective foster and adoptive families.

**Element 7: Non-discriminatory fee structures**

**Strengths**
- PSD endorses a non-discriminatory fee structure and provides the home study and pre-service trainings free of charge. This practice allows families of various income levels the opportunity to foster or adopt children in care.
- PSD foster or adoptive parents may purchase an official copy of their home study for a reasonable fee.

**Challenges**
- Some families complete the home study process with PSD and leave the agency shortly thereafter to pursue private or out of state adoptions.
- Fee schedules are not readily accessible to field staff.

**Strategies**
- PSD will develop a fee structure that is easily accessible to staff and families.
PSD will communicate the steps involved for a family to purchase their home study.

**Element 8: Procedures for a timely search for prospective parents for a child needing an adoptive placement, including the use of exchanges and other interagency efforts, provided that such procedures ensure that placement of a child in an appropriate household is not delayed by the search for a same race or ethnic placement.**

**Strengths**

- PSD utilizes the available recruitment resources through NM Adoption Exchange to recruit adoptive families, children in care are photo listed with AdoptUSKids, Wendy's Wonderful Kids, Wednesday's Child, Adoption Columns, AdoptUSKids, Heart Gallery Program, CYFD website and Facebook page.
- CYFD’s Heart Gallery of NM program in partnership with the NM Heart Gallery foundation continue to develop venues and opportunities to raise awareness for adoptive parents, especially youth, large sibling groups and hard to place children.
- PSD provides opportunities for children and teens to meet and interact with prospective adoptive families through all ages and teen adoption events.
- PSD encourage youth to write their own profiles to be added to their photo listings.
- PSD partnered with the Adoption Exchange and Heart Gallery foundation on videos featuring some of the heart gallery children.
- Through PSD adoption consultants, potential in state and out of state adoptive families become identified as resources for waiting children.
- PSD will have implemented digital Heart Galleries in at least five locations statewide by the end of 2014.
- PSD has a minimum of 17 permanent Heart Gallery portrait exhibits in New Mexico.
- PSD traveling Heart Gallery portrait exhibits are featured throughout different communities in the state.
- CYFD’s Facebook page was developed in the last year and is growing.
- PSD photos of waiting children and materials are consistently updated to reflect the child or youth’s growth and development and posted on the CYFD and Heart Gallery of NM websites.
- PSD has developed partnerships with newspapers to have monthly adoption columns and feature children that are waiting for a permanent resource.
- PSD partners with the NM Friends of Foster Children in foster and adoptive parent recruitment and retention events.
- PSD partners with Adoption Options in Colorado. This agency has developed and delivered training for foster and adoptive parents, have presented workshops and trainings at annual conference as well as regionally.
- PSD has well established ICPC and ICAMA processes which remove barriers and assist in timely completion of interjurisdictional placement of children in cases across state lines.
- PSD has ICPC and ICAMA specialists at the state level.

**Challenges**

- Due to vacancies and work volume PSD does not always register waiting children with the Adoption Exchange or AdoptUSKids.
- PSD has not allocated appropriate funds for contracts to meet the level of need.
- Digital Heart Galleries are in its infancy and the funding stream to buy the necessary equipment is limited.
- Older youth often do not want to be adopted. PSD needs to provide training for field staff to reinforce the need for adoptive homes for teens is necessary but this is not always available.
- PSD ICPC database is in need of updating and to be integrated into our information system.
- PSD ICPC and ICAMA training is needed on an ongoing basis.

**Strategies**

- PSD will deliver ICPC and ICAMA training to staff working with interjurisdictional cases.
- PSD will utilize the Adoption exchanges to its maximum potential by requiring staff to register all waiting children through the exchange.
- PSD will develop a system with the Adoption Exchange to filter appropriate and approved families for consideration.
- PSD will develop a protocol with the Adoption Exchange whereby families are informed about the process to become licensed and approved as a prospective family in their state.
- In collaboration with CYFD’s communication director, PSD will engage our media partners to examine the current processes to photo list the children such as adoption columns.
- PSD will partner with the CYFD communications director to assist in the media efforts statewide.

**B. Healthcare Oversight and Coordination Plan**

Centennial Care was implemented in New Mexico in January 2014. Centennial Care is the Medicaid system managed by the New Mexico Human Services Department and utilized by PSD for the physical and behavioral health needs of children, youth and families. The Centennial Care plan can be located at: [http://www.centennialcare.net/](http://www.centennialcare.net/). PSD partners with the Managed Care Organizations (MCO), Client Service Agencies (CSA), and Health Homes to access, and share information relevant to the physical and mental health of children and families served and to ensure delivery of identified services.

As part of Centennial Care, The four MCO’s are responsible for physical and behavioral health. Each MCO will develop a care coordination process; the intensity of care coordination will depend on the client’s risk level. Care coordinators work collaboratively across one or multiple MCO’s to inform each other of the client’s needs and to coordinate service plans.

PSD relies on certain events and/or data to trigger a review of an individual’s health status and needs. These triggers include events such as 1) Abuse or neglect reports involving the individual; 2) New diagnosis with significant health or safety impact; 3) New diagnosis involving behavioral health or substance abuse; 4) Hospitalization; 5) Request by provider or family member; and 6) Any other indication that the individual may need to move to a new risk group. In addition, plans will have software that will enable the care management staff to access patient records in real time and on demand from all providers in the system. When a trigger event occurs for an individual, the MCO will assign a care coordinator to complete a comprehensive assessment for low and medium risk individuals or deploy the assigned care coordinator to update the assessment for an individual who is already receiving complex case management.

PSD has collaborated with the MCOs and provider agencies to develop a procedure for monitoring psychotropic and other prescription medications. This procedure will be effective July 1, 2014. It requires that
all changes to medication be approved by the assigned PSD worker and birth family, if appropriate. PSD workers will become more active participants in the monitoring of medication and will receive specific training on medication. PSD utilized a psychotropic medication workgroup that includes PSD staff, medical providers, youth and foster parents to assist in developing these procedures. PSD participates in a statewide Medication Monitoring committee that has developed a complex case consultation. PSD workers are able to staff cases with psychiatrists who volunteer their time to review casework, best practice and medication. The committee is in the process of coordinating a summit. The goal of the summit will be to provide education to psychiatrists in the state regarding medication and best practice for prescribing medications with the foster care population. CYFD foster children are required to obtain an EPSDT screening within 30 days of placement. The PSD worker receives recommendations from the physician who completes the EPSDT screening and provides follow up. Centennial Care requires that all Medicaid members have a high risk assessment completed within 30 days of membership. The high risk assessment determines the need for a comprehensive needs assessment. This assessment primarily screens for physical health. The level of care coordination by the designated MCO is determined upon completion of this assessment. The care coordinators are responsible for following up on identified needs in the comprehensive assessment. PSD continues to provide trauma informed assessments for all children in foster care. This assessment is incorporated in to the comprehensive assessment used by the CSA to determine the needs of children and families. PSD continues to implement the practice of referring children to a CSA to monitor and treat emotional trauma related to maltreatment and removal from home and for eligibility determination. The MCO, CSA and caseworker are required to meet and discuss recommendations. During this team meeting responsibilities for follow up is designated. This process allows for a cross check on services needed, shared responsibility for services and collaboration. All members are responsible for ensuring that trauma is assessed and treated by the appropriate agency. PSD is also researching the use of Child and Adolescent Needs and Strengths (CANS) as a trauma screening tool to use in conjunction with our Neurosequential Model of Therapeutics (NMT). As stated above, all children in care are taken for EPSDTs exams within 30 days of placement in care. Workers are responsible for follow up on any issues identified in that exam. The MCOs Care Coordination process assess and coordinates physical and behavioral health for children. They are responsible for ensuring services have been provided. The CSA’s are also responsible for ensuring that all needs for a child are addressed. CSA’s are the entity responsible for completing comprehensive assessments for children. The assessment addresses critical domains of child’s life and provides recommendations for services. The domains include physical, development, educational, recreational and behavioral. CSA’s also provide comprehensive community support services (CCSS) to address all the above domains. CCSS is a service designed to assist in the recovery and resiliency of families. This service can provide support to our foster families when the child is placed in their home. The CCSS worker is provided with a copy of the comprehensive assessment and works with the child’s team to ensure that all recommendations for needs are addressed. The CCSS worker is able to assist foster parents in obtaining all services as well as provide intervention related to structure in the home, interventions to assist in transition, activities that are relational, repetitive, rewarding, rhythmic, respectful and relevant.

In July of 2014, the Severely Emotionally Disturbed criteria was amended to include trauma as a qualifying condition for children to become eligible for core service agency (CSA) criteria. This change allows all children in foster care to receive services. This process began in June of 2013, led by PSD as part of the Three Branch Institute initiative to improve well-being, as a mechanism to ensure that all foster children were able to become CSA eligible. All characteristics of trauma informed interventions can occur in the home.

Psychiatric and crisis response services are also required for all CSA eligible clients. Every county in the state has a designated CSA required to respond to the needs of children and adults. PSD is working closely with the
providers of CSA services, the Human Services Department that funds Medicaid services and the Managed Care Organizations (MCO’s) who disburse Medicaid funding to ensure that each child in foster care has timely access to CSA services. There have been efforts to require designated CSA’s who are unable to meet the requirements of their contract, to subcontract services to other agencies who are willing to provide services under the CSA menu.

PSD has developed an agreement with the Human Services Department to allow young adults to receive health insurance until the age of 26. (See above Chafee section IV for further information.)

PSD retains the services of a forensic pediatrician, Dr. Karen Campbell as medical director. The medical director provides training on the detection of abuse and neglect and the impact of severe abuse on the child victim. She is available to PSD staff for consultations related to meeting the on-going physical needs of children and to assist with identification of specialists, as needed. PSD also has access to Dr. George Davis, another medical director who is retained through CYFD that provides training and consultation on mental health needs of our youth. PSD had also developed a consultation process for staff to have access to voluntary psychiatrists for review, support and recommendations related to complex cases.

PSD has access to physicians and other medical professionals to consult with PSD both in terms of individual children and in terms of changes needed in the overall service system. There are clinics in Albuquerque that provide comprehensive services to foster children and youth. At the stage of an abuse or neglect investigation, the Child Abuse Response Team (CART) provides psychological evaluations and comprehensive physical exams, including dental. CART is at the University Hospital and can be used by other counties if the youth is sent to Albuquerque; it is essentially a trauma team. Dental services can be rather limited, but there are traveling dental clinics (not limited to foster children) in Chaves, Doña Ana, and Santa Fe Counties. Routine health care is generally accessible statewide, but for certain specific needs, individuals have to travel to Albuquerque. Telemedicine care is being provided in some of our counties to assist in providing more timely care services to individuals.

PSD remains involved with the Behavioral Health Purchasing Collaborative (BHPC). PSD and Managed Care Organizations (MCO’s) have implemented a process to provide for timely behavioral health assessments for children when they first enter foster care. Assessment results are used to ensure the timely provision of services and to enhance placement stability.

PSD addresses initial and follow up health care screenings, treatment of health needs and updated medical information through our permanency planning procedures that requires a child to have a complete physical examination (EPSDT screening) within the first 30 days of custody. Procedures continue: “Each child in out-of-home placement receives scheduled routine medical care, dental care, eye care, or psychological services, as needed. For Medicaid eligible children, the investigation or permanency planning worker coordinates care with the child’s primary provider. Information regarding the child’s medical, dental, eye care or psychological status is documented on the Medical Profile tab in the Medical window in FACTS and is updated at least every six months to reflect the medical status. Hard copies of records are maintained in the hard file as well as provided to the substitute care provider.” PSD follows the EPSDT schedule for routine medical care. PSD has also worked with Department of Health (DOH) to be able to access DOH immunization records for children in foster care and are able to import those records into the foster care record.

PSD Placement Services procedures requires:

- There shall be a designated licensed physician and dentist for each child, so that a coordinated plan of care is assured.
- Foster parents shall obtain medical attention for any sick or injured child. Foster parents, in their role as an adjunct representative of state government, shall not rely solely on spiritual or religious healing for children.
Foster parents shall maintain copies of all educational and medical documents related to the foster child in a traveling medical and educational file that shall remain with the child if the child is moved.

The permanency planning worker (PPW) ensures that the foster family is obtaining medical attention for any sick or injured child and that the family is meeting the child’s ongoing health care needs such as well child checks.

PSD youth services procedures comply with provisions of P.L. 111-148, the Patient Protection and Affordable Care Act, which require states to provide information about the importance of designating another individual to make health care treatment decisions on behalf of the child if the child becomes unable to participate in such decisions and the child does not have, or does not want, a relative who would otherwise be authorized under State law to make such decisions, and provides the child with the option to execute a health care power of attorney, health care proxy or other similar document recognized under State law. In addition to the amendments to procedures, PSD has provided training on the new requirement to our youth transition specialists.

C. Disaster Plan

In response to the requirements of the Child and Family Services Improvement Act of 2006, PSD developed the Protective Services Statewide All-Hazard Emergency Response Plan (attached). In March 2007, a Protective Services Emergency Planning Committee was created, including representatives of various parts of the state and various service areas (intake, investigation, placement, permanency, legal, etc.). The Emergency Planning Committee developed a planning template consistent with the National Response Template, the National Incident Management System, FEMA planning guidelines, and the State of New Mexico’s All-Hazard Emergency Operations Plan. Using this template, and following the suggestions provided in Coping with Disasters and Strengthening Systems: A Framework for Child Agencies as well as models from other states (particularly Washington and Delaware), the Committee developed the All-Hazard Emergency Response Plan, originally submitted to ACF in September 2007.

The plan has been minimally revised since it was originally submitted. In the last seven years New Mexico has not experienced a state disaster that has required the use of the Disaster Plan (All-Hazard Emergency Response Plan). Placement staff continue to obtain and update information from foster parents, so that all children in care can be located and their services can be maintained with minimal disruption. PSD is also in the process of providing Smart phones to all staff which will provide additional methods for staff to contact their supervisor or for their supervisor to contact them in case of an emergency. Not all offices are consistent on completing drills or “practices” to test the All Hazard Emergency Plan. Over the next two years Policy, Procedure, Training and Federal Reporting bureau staff will work with Field Deputy Director and Regional Manager’s to assist in improved knowledge of the All Hazard Emergency Plan and compliance with drills or “practices”. In the last year PSD began work with Department of Health, specifically with Heather Stanton, to assist in developing a disaster plan specific to children. Throughout the next five years, PSD will participate in multidisciplinary meetings, led by Department of Health to continue this effort.

The PSD Plan has two inter-related and equally important components: local and statewide. Together these processes will assure:

- continued services for children in state custody and for new cases caused by the disaster,
- ongoing communication with workers displaced because of the disaster,
- preservation of essential program records, and
- coordination and information sharing with other states.

State Planning: The PSD Statewide All-Hazard Emergency Response Plan addresses all phases of emergency preparedness, including prevention, response, and recovery (or, as organized in Coping with Disasters and Strengthening Systems, before, during and after a disaster). The plan is considered a work in progress, constantly
changing in response to new hazards, new technologies, and new state and federal emergency response initiatives. In the next year, PSD will work with Academy for Training and Professional Development to develop an e-learning on the emergency response plan process.

Local Planning: In New Mexico, and across the country, it is understood that almost all emergency response takes place at the local level. Every county in the state has a local emergency manager, and many counties also have multi-disciplinary local planning committees. In April 2006, each PSD county office manager (COM) designated a representative to serve as a liaison between PSD and the local emergency management system. These PSD liaisons help inform state-level planning activities and serve as points of contact for the dissemination of emergency planning information, including checklists for foster families for emergency preparedness and resources made available through National Resource Centers and other sources. Each liaison has been provided a copy of Coping with Disasters and Strengthening Systems: A Framework for Child Agencies for additional information and direction. During the spring of 2008, meetings were conducted in each of the five PSD regions, bringing together COMs, county liaisons, local emergency managers, and others to begin to work together to incorporate a PSD response into local emergency response plans. Each county office is charged with completing a county emergency response plan. Ten counties have begun to work on their plans, and PSD plans to have plans in all counties within the next five years.

Following the Region VI ACF/FEMA Disaster Response Conference, the Region VI Emergency Management Specialist traveled to New Mexico and met with representatives of several agencies, including PSD, other CYFD components, Child Support Enforcement and other HSD components, and Department of Health. PSD continues to collaborate with Department of Health on development of a statewide disaster plan.

As of May 2009, a modification to the FACTS system now allows emergency contact information for staff, parents, and foster parents to be entered into and maintained in the system. The system provides for up to three contacts, including names, addresses, e-mail addresses, and phone numbers. We have begun the process of collecting this contact information and will continue to do so.

D. Training Plan

PSD operates a training and staff development program that supports the goals and objectives of the Child and Family Service Plan (CFSP). Children, Youth and Families Department Foundations of Practice (FOP) training and PSD’s advanced trainings are designed to support safety, permanency and well-being for children, as well as PSD’s CFSP Plan for Improvement goals. PSD has worked with the Academy for Training and Professional Development to include the Piñon Practice Model, Adaptive Leadership, and Continuous Quality Improvement (CQI) into the FOP curriculum. In order to prepare an employee to perform job duties, an employee is taught child welfare concepts, which include, but are not limited to:

- Trauma informed - A trauma informed component which assists the employee in addressing trauma experienced by the child, birth family or legal guardian, the foster parents and with themselves.
- Child maltreatment - An employee will obtain knowledge in identification of child maltreatment and gain skills in assessing safety threats to the child and identifying parental protective capacities.
- Worker bias - An employee will become aware of their personal biases and how those biases may impact their decision making in working with children and families. Recognizing biases assists an employee to be self-aware and may better prepare an employee for their work in child welfare which may help with retention of employees.
- Communication/Interview skills - An employee learns to communicate with children, parents, guardians, foster parents and other partners in child welfare to effectively assist in achieving safety, permanency and well-being for children and families.
In addition to the FOP the training plan addresses services provided under Title IV-B and IV-E and provides ongoing training for staff and providers who deliver these services that addresses skills and knowledge needed to carry out their duties. Training is also provided to current and prospective foster parents that enhances their skills and knowledge to carry out their duties with foster and adopted children. In addition all of PSD trainings are offered to our tribal partners. In 2014 CYFD enhanced their Professional Development Bureau into an Academy for Training and Professional Development. This will allow us to continue to improve our training opportunities for our staff. The new “core” training, foundations of practice will be piloted June 30, 2014. It will be offered on a monthly basis, have an evaluative component, provide blended learning experiences and allow for higher levels of skill building.

PSD training includes foundations of practice, mandatory trainings and ongoing trainings. Each of these trainings are supported through a combination of state general funds and federal Title IV-E, Title IV-B Part 2, Chafee, CAPTA and other funds. Non-IV-E funds (e.g., Title IV-B Part 2 and CAPTA), although limited, provide important support for training for contract service providers, as well as staff training on topics not eligible for IV-E reimbursement. Trainings are provided by Academy for Training and Professional Development, Protective Service Employees, Juvenile Justice Employees and New Mexico State University Family and Child Welfare Training Project Employees. A cross division Training Advisory Council (TAC) continues to assist in development of staff trainings. Please refer to the attached Training Plan for an outline of PSD trainings.

PSD utilizes a Public Assistance Cost Allocation Plan (PACAP) to provide accurate claiming. This plan includes Random Moment Sampling, related claiming procedures, and calculation of IV-E eligibility rates. Through Random Moment Sampling (RMS) process, CYFD collects specific information on the subject matter of the training the person sampled was receiving. This allows for more accurate claiming. In addition, the cost of new staff participating in Foundations of Practice training are captured and tracked separately. Only after new staff complete foundations of practice training are they included in the sampling population for the RMS.

**Non IV-E Training – 2015 – 2019**

**Title IV-B Part 2 & CBCAP:** For 2015 – 2019, Title IV-B Part 2 training funds are used to support the annual adoptive family conference, as well as quarterly provider training and Circle of Security training for some PS staff and providers. Quarterly provider trainings occur, IV-B Part 2 funds and “Protective Service provider core” (a four day reduction of the PSD foundations of practice) IV-B Part 2 funds and PACAP funds.

**CAPTA:** During 2015 – 2019, CAPTA funds are utilized to support and supplement several training efforts, including Circle of Security, Abuse and Neglect Detection and Reporting E-learning, and costs related to development of multi-disciplinary teams and Child Advocacy Centers (Valencia County). CAPTA funds supports the attendance of PSD staff and attorneys at the annual Children’s Law Institute.

**Chafee:** For 2015 – 2019, Chafee funds are used to support the annual Independent Living Conference,

**CBCAP:** CBCAP funds will be used in 2015 – 2019 to help support the delivery of “Protective Service Provider Core”, “Positive Parenting Program” (Triple P) as well as offerings of “Circle of Security Parenting” training. For more information, see PSD’s annual CBCAP Report.

**Other:**

- Other training for PSD staff is provided through Academy for Training and Professional Development in areas such as defensive driving, HIPAA, general supervisory skills, Respect in the Workplace, Ethics, domestic violence and other topics.
- PSD FACTS staff provide statewide training whenever the FACTS system undergoes a major revision. FACTS staff follow up throughout the year with county and regional “booster” training on complex topics relating both to annual and mini releases. PowerPoint trainings for the various aspects of the annual releases are made available to staff via the CYFD Intranet. Initial FACTS training will be provided through e-learnings during foundations of practice.
PSD staff provide informal training and technical assistance regularly to staff in the field when the need arises. For example, the ICPC coordinator often provides training on changes in ICPC procedures; youth services staff provide training on emerging issues related to youth, etc.

A pilot test of training on “Understanding Children with Disabilities, Victimization, Risk and Systems Safety” for any interested staff person was provided through an arrangement with the New Mexico Coalition of Sexual Assault Programs, Inc. with funding through a SAMSHA grant. A half-day pre-session was provided at the 2014 Children’s Law Institute and four regional trainings occurred in April and May 2014.

Protective Staff that assist as trainers due this in addition to their other job-related duties, the cost is absorbed by the agency.

IV-E Training – 2015 – 2019

a. Social Work Stipend Program: Through Agreements with the four Universities offering Social Work programs in the state (New Mexico Highlands University, New Mexico State University, Western New Mexico University, and Eastern New Mexico University), stipends were offered students for working on BSW or MSW degrees in exchange for coming to work for PSD upon graduation. During the 2012 – 2013 program year, PSD established a Stipend Program Workgroup with representatives from each PSD region and from each School of Social Work. The group had developed a standardized application, interview and selection process. The current emphasis is on evaluation and long term benefits of the program.

b. Foundations of Practice: Sessions will be provided each month for ten to twelve sessions a year. The training is completed in a five week time frame, of which one week is on the job training (OJT) activities. Foundations of practice will be piloted June 30, 2014. Please see the attached training plan for courses included in foundations of practice.

c. Other IV-E Training:

- Supervisory Core Training: The 9-day PSD supervisory core was not offered in 2013 – 2014. Because of agency vacancies there was not a sufficient number of new supervisors to make it feasible to offer this resource intensive training.

- Annual Children’s Law Institute: This conference was held as planned, with approximately 800-900 people in attendance.

- Tribal ICWA Conference: This conference will be held in July 2014. The focus will be on how to enhance tribal and state relations.

- Annual Court Improvement Project Cross-Training: These annual events are funded largely through the Court Improvement Project’s cross-training grant, with some logistical support provided by SWIFCA through IV-E. The 2014 cross-training topic was “Being Well: Mental Health Considerations for the Families Involved in Child Welfare.”

- Annual Foster Parent Conference and Recertification Training: The mandatory foster parent recertification training in 2013 – 2014, paid for with Title IV-E funds “Waking up to Trauma: Daily Trauma Informed Care.” The 2014 training will be on Understanding Children with Disabilities, Victimization, Risk and Systems Safety by Dr. Scott Modell.

- RAFT, Foster Parent Pre-Service Training: PSD’s foster parent pre-service training includes skill building on childhood trauma and otherwise improves the quality of foster and adoptive parent preparation. Relative, Adoptive and Foster Training (RAFT) curriculum provided in every county. Staff and contractors continue to go through a certification process to train the curriculum.
• “Knowing Who You Are”: Protective Service Division, NMSU and Academy for Training and Professional all have staff who were trained by Casey certified trainers. One session of KWYA was offered in 2013 – 2014, which included ten participants.

• “Working with Youth”: A six hour training that included information on positive youth development, adolescent brain development, youth engagement, talking with youth about sex, and youth safety issues.

• Special Topics in Adoption: Trainings are provided to CYFD staff and foster and adoptive families to assist in their knowledge in adoptions.

• SAFE Training: SAFE training is ongoing throughout the year, provided by PSD staff certified to train SAFE.

D. Financial Information

In FY15, the state will not use more Title IV-B, Subpart 1 funds for child care, foster care, maintenance and adoption payments than it did in FY2005. Currently, we are not using any funds for adoption subsidy payments or child care.

New Mexico’s IV-B Subpart 1 funds for child care, foster care maintenance and adoption assistance payments for FY 2014 does not exceed the amount expended in FY 2005, $454,505.

New Mexico’s expenditure of non-Federal funds used as a match for Title IV-B Subpart 1 funds for foster care maintenance for FY 2014 does not exceed the amount expended in FY 2005, $3,152,282.