Key Quarterly Performance Measures Report

Children Youth & Families Department

2nd Quarter. Fiscal Year 2019
Contacting CYFD

Office of the Secretary ...................... 505-827-7602  Behavioral Health Services .................. 505-827-8008
Office of the General Counsel ............. 505-476-0471  Juvenile Justice Services ...................... 505-827-7629
Constituency Affairs ....................... 505-827-7606  Administrative Services ....................... 505-827-8069
Public Information Officer ................. 505-827-7602  Employee Recruitment ......................... 505-827-7620
Early Childhood Services ................ 505-827-7659  Foster Care/Adoptions Hotline .............. 800-432-2075
Protective Services ....................... 505-827-8400  Child Abuse/Neglect Hotline .... #SAFE (#7233) by cell or 855-333-SAFE (7233)

New Mexico Children, Youth and Families Department
P.O. Drawer 5160
Santa Fe, NM 87502-5160

www.cyfd.org
Objective

• Increase the percentage of providers participating in New Mexico’s Tiered Quality Rating and Improvement System (TQRIS) called FOCUS.

Causal and Contributing Factors

• A small percentage of providers in rural and frontier areas of the state have three- to five FOCUS STAR levels. This is due to the lack of resources, and challenges with sustainability.
• Consultation had to be revamped since in some instances the consultation did not meet the needs of the program.
• Verification is taking place by CYFD-ECS-Office of Childhood Development staff which is ensuring accountability in the implementation.

Targeted Corrective Actions to Improve Performance

• Continue efforts of the Early Childhood Investment Zone strategies to bring professional development and consultation resources to rural and frontier communities.
• Rural provider rates were raised to equal metro provider rates in January 2015.
• October 2015 implemented FOCUS Quality Differential Increase: After cost and revenue analysis for child care centers, CYFD Early Childhood Services determined the previous quality differentials were not sufficient at the 4 and 5 Star quality level due to the required decrease in staff/child ratios.
• Provide information to parents seeking child care on the importance of quality and how to identify quality programs. All field offices have look for the stars information in their lobby areas.
• Promote and provide incentives for the inclusion of children with special needs (including children with behavioral challenges and those in families that are homeless) in child care programs statewide. Use the Social/Emotional Pyramid Model strategies and training to support children with challenging behavior. Use of an Integrated Consultation System including Mental Health (Social/Emotional Support for young children) and Inclusive Practices for programs to receive onsite support.
• Increase child care program quality through an Integrated Consultation System in a continuum support process.
• TQRIS Standards will continue enhancement based on program self-assessment and Continuous Quality Improvement process.
• Recruitment of programs to participate in the TQRIS/FOCUS continues taking place for a variety of early childhood programs: center-based, family child care, group homes, two through five Stars, rural, urban, Early Childhood Investment Zones programs, etc.
• Continued verification by CYFD-ECS-Office of Childhood Development staff to ensure accountability.

Data Source / Methodology

• System: Family Automated Client Tracking System (FACTS)
• Windows: Provider Organization
• High Quality = Any child care programs at a 3 Star FOCUS 4 Star FOCUS, 5 Star FOCUS level or Nationally Accredited
• Report(s): sm10a16 (“FS Providers with Active Licenses”)  
• Numerator: # of licensed providers at FOCUS Levels 3 thru 5
• Denominator: # of licensed providers
### EARLY CHILDHOOD SERVICES

#### Percent of children receiving subsidy in high quality programs

<table>
<thead>
<tr>
<th>FY19 Q4</th>
<th>FY19 Q3</th>
<th>FY19 Q2</th>
<th>FY19 Q1</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>66.4%</td>
<td>67.5%</td>
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<table>
<thead>
<tr>
<th>FY18</th>
<th>FY17</th>
<th>FY16</th>
<th>FY15</th>
<th>FY14</th>
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<tr>
<td>59.9%</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
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</tbody>
</table>

**Desired Trend**

| FY19 Target: 53% |

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### Objective

- Increase the percentage of children participating in New Mexico’s Tiered Quality Rating and Improvement System (TQRIS) called FOCUS.

### Targeted Corrective Actions to Improve Performance

- Continue efforts of the Early Childhood Investment Zone strategies to bring professional development and consultation resources to rural and frontier communities.
- Rural provider rates were raised to equal metro provider rates in January 2015.
- October 2015 ECS implemented FOCUS Quality Differential Increase.
- Provide information to parents seeking child care on the importance of quality and how to identify quality programs. All field offices have look for the stars information in their lobby areas.
- Promote and provide incentives for the inclusion of children with special needs (including children with behavioral challenges and those in families that are homeless) in child care programs statewide. Use the Social/Emotional Pyramid Model strategies and training to support children with challenging behavior. Use of Mental Health Consultants for programs to receive onsite support.
- Increase child care program quality through an integrated Consultation System in a continuum support process.
- Am I Eligible? Online Application and Referral will reach out to families encouraging them to participate in Child Care Assistance.

### Causal and Contributing Factors

- A small percentage of providers in rural and frontier areas of the state have three- to five FOCUS STAR levels. This is due to the lack of resources, and challenges with sustainability.
- Am I Eligible? Has provided outreach opportunities for low income families to participate in high quality settings.

### Data Source / Methodology

- System: Family Automated Client Tracking System (FACTS)
- Windows: In-Home Services, Home Provider License, Private Provider License
- High Quality = Any child care programs at a 3 Star FOCUS, 4 Star FOCUS, 5 Star FOCUS level or Nationally Accredited
- Report/s: sm10a16 ("FS Providers with Active Licenses")
- Numerator: # of Subsidy Children Served at FOCUS Level 3 thru 5.
- Denominator: Monthly Average # of Subsidy Children
**Percent of families receiving home visiting for six months or longer (excluding home visiting level two), that have one or more protective services substantiated abuse or neglect referrals from the reporting year**

<table>
<thead>
<tr>
<th>Year</th>
<th>Q4</th>
<th>Q3</th>
<th>Q2</th>
<th>Q1</th>
<th>Desired Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td></td>
<td></td>
<td>0.95%</td>
<td>0.25%</td>
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<tr>
<td>FY18</td>
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<td></td>
<td></td>
<td>1.94%</td>
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<tr>
<td>FY17</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
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<tr>
<td>FY16</td>
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<td>n/a</td>
<td>n/a</td>
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<tr>
<td>FY14</td>
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<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

This is a duplicate of the Outcome measure:
Percent of families receiving home visiting services for at least six months that have one or more protective services substantiated abuse or neglect referrals during the participating period

A request to discontinue reporting was submitted for FY20
**Objective**

- Increase participation of families qualifying for Child Care.
- Decrease the number of children in child care subsidy that have one or more protective services substantiated abuse or neglect referrals.

**Causal and Contributing Factors**

- Child Care needs to be promoted to low income families who may qualify for the program.
- Families may not participate in child care due to several factors, such as access, understanding of the program and qualification period.
- Child Care providers may not be ready to provide care and services for high needs children with behavior issues and who may have experienced trauma.

### Percent of children receiving state childcare subsidy with substantiated abuse or neglect referrals during the childcare assistance participating period

<table>
<thead>
<tr>
<th>Year</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>FY19 Target: 1.3%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY18</td>
<td>1.18%</td>
<td>0.73%</td>
<td>0.47%</td>
<td>1.3%</td>
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<tr>
<td>FY17</td>
<td>1.2%</td>
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<td>n/a</td>
<td>n/a</td>
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<tr>
<td>FY16</td>
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<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
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</table>

**Targeted Corrective Actions to Improve Performance**

- Continue promoting Child Care through diverse venues: Web-based (PullTogether.org, Am I eligible? etc.)
- Continue building access for high quality child care for low income families, particularly in high needs un-served or underserved communities.
- Implementation of the 12 month eligibility period.
- Allow for 3 month activity search with implementation of case management.
- Continue working with child care providers in the implementation of the Social/Emotional Pyramid Model strategies and training to support children with challenging behaviors. Use the integrated Consultation for programs to receive onsite support.
- Develop quality initiatives for registered providers utilizing a community approach.

**Data Source / Methodology**

- System: Family Automated Client Tracking System (FACTS)
- Windows: In-Home Services, Home Provider License, Private Provider License
- Report(s): sm10a16 ("FS Providers with Active Licenses") — report from CPS
- Numerator: # of Unduplicated Subsidy Children Served with One or More CPS Abuse/Neglect Referrals, Minus Those Receiving CPS Child Care
- Denominator: # of Unduplicated Subsidy Children Served (not including CPS Child Care and At Risk)
Percent of families receiving home visiting services for at least six months that have one or more protective services substantiated abuse or neglect referrals during the participating period

<table>
<thead>
<tr>
<th></th>
<th>FY19</th>
<th>Q4</th>
<th>Q3</th>
<th>Q2</th>
<th>Q1</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY18</td>
<td>1.94%</td>
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<tr>
<td>FY17</td>
<td>n/a</td>
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<tr>
<td>FY16</td>
<td>n/a</td>
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<td>FY15</td>
<td>n/a</td>
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<tr>
<td>FY14</td>
<td>n/a</td>
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</table>

Desired Trend

Objective

- Provide training to home visitors to recognize signs of risk among families and how to create safety plans to prevent an incident.
- Home Visitors will receive training and support to refer families to other community resources and encourage families to enroll.
- Provide training to home visitors on developmentally appropriate expectations and how to share that information with families.
- Provide training and support to home visitors to promote positive parent-child interactions and safety when working with families.
- Home Visitors may have personal experience or trauma-related to abuse/neglect which may impact the relationship with a high risk family.
- Increasing professional development for Home Visitors including Circle of Security and IMH (Infant Mental Health) endorsements to implement trauma-informed practices.

Causal and Contributing Factors

- Families presenting with a higher risk of protected services referrals, often disengage from home visiting services prior to the six month mark.
- Home Visitors have indicated a need for more training and support around working with high risk families to increase engagement for a longer period of time.
- Referrals to other community resources may be provided but the family may not engage in additional support services (mental health services, substance abuse counseling, etc.), thus causing potential barriers to engaging in home visiting.
- Safety Plans are often associated with domestic violence and home visitors have expressed some challenge in reframing the practice to address other concerns of risk in the home.

Targeted Corrective Actions to Improve Performance

- Enhance Consultation Expectations so that home visiting teams are provided with focused support around education and safety planning for high risk families.
- Ensure ongoing communication between Local HV Program Managers and CYFD Manager/Monitors when a family with high needs, or has previously been referred to Protective Services is being served.
- Provide consultation and ongoing education to home visiting teams on how abuse/neglect impacts child development in addition to the benefits of positive parent-child interactions and the importance of healthy, safe homes for children.
- Introduce SafeCare Curriculum and certification targeting Level II Home Visiting programs
- Work with home visiting programs to strengthen relationships with community resources to enhance the referral process and encourage family engagement in additional support services.
- Implementation of Level II Home Visiting with a more targeting approach.

Data Source / Methodology

- Home Visiting data provided by University of New Mexico Continuing Education Division.
- Numerator: Total # of families that have 1 or more protected services substantiated abuse or neglect referrals
- Denominator: Total # of families receiving HV services for 6 months or longer

Desired Trend

FY19 Target: 5.0%
Objective

- Provide professional development opportunities to Home Visiting staff on the importance of positive parent-child interactions, how it looks like, strategies for communications with families and Infant Mental Health practices.
- Provide training and technical assistance for Home Visitors on the PICCOLO (Parenting Interactions with Children: Checklist of Observations Linked to Outcomes) tool and strategies.
- Increase participation on Circle of Security training for Home Visiting Staff.
- Improve fatherhood participation in child’s life.

Causal and Contributing Factors

- Parenting interactions are important for children’s early development, however it is very difficult to measure and to use objective systems for observation and assessment.
- Programs and practices are not targeting fathers or positive male role models as part of the essential caregiving unit.
- There is very little understanding of the cultural impact that may determine positive parent-child interactions.
- Lack of appropriate training may lead to inappropriate assessment and administration of the PICCOLO tool.
- Circle of Security is a strategy to assist professionals and paraprofessionals working in the Home Visiting program, implement strategies that foster positive parent-child relationships.

Targeted Corrective Actions to Improve Performance

- Increase number of opportunities for training and technical assistance in the proper implementation and interpretation of PICCOLO.
- Increase fatherhood involvement practices as part of the quality improvement process.
- Increase awareness, training and coaching for Home Visitors regarding cultural competencies and practices.
- Increase Circle of Security, FAN and SafeCare training for Home Visitors as part of their professional development.

Data Source / Methodology

- Home Visiting data provided by University of New Mexico Continuing Education Division.
- Numerator: Number of families with time 2 PICCOLO scores, by domain, and difference between interval scores.
- Denominator: Number of families with initial PICCOLO scores, by domain.
Percent of children in CYFD funded pre-kindergarten showing measurable progress on the school readiness fall-preschool assessment tool

<table>
<thead>
<tr>
<th></th>
<th>FY19</th>
<th>FY18</th>
<th>FY17</th>
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<th>FY15</th>
<th>FY14</th>
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<tbody>
<tr>
<td>Q4</td>
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</table>

(reported annually in June)

Objective

- Increase the number of children showing measurable progress on the preschool readiness for kindergarten tool.
- Increase access to voluntary, high-quality pre-kindergarten programs.
- Provide developmentally appropriate activities for New Mexico children.
- Expand early childhood community capacity.
- Support linguistically and culturally appropriate curriculum and supports for Dual Language Learners and Inclusion Practices.
- Focus on school readiness.
- Fund professional development—teacher training and on-site technical assistance and support.

Causal and Contributing Factors

- In order to have an accurate measure of children’s status in relation to the NM Pre-K Learning Outcomes, staff must be adequately trained in using the Observational Assessment Tools.
- To produce the measure, the data for individual programs must be accurately entered into the Prek data system and aggregated to produce the necessary reports both for the individual programs and for the state.
- This data is reported annually in June.
- New Mexico’s unique mixed delivery system ensures access and parental choice by taking advantage of existing community resources as well as “goodness-of-fit” to ensure linguistic and cultural appropriateness.

Targeted Corrective Actions to Improve Performance

- All teaching staff new to NM Pre-K will receive Day One and Day Two training in using the Observational Assessment Tools.
- All continuing teaching staff will have access to a one-day Refresher training and to on-going training and support regarding the use of observation data to plan and implement appropriate NM Pre-K curricula.
- All NM Pre-K program standards will be monitored for successful implementation in all program sites utilizing the 360 Model.
- All NM Pre-K participants will attend regional and on-site training focused on improving instruction.
- All NM Pre-K programs will be provided with the necessary technical assistance, guidance and support through the mentoring component, Self-Assessment and on-site monitoring visits and the specialized training described above.

- The integrity of teacher-generated data is often questioned since it is sometimes not reported on a timely basis and there is the possibility of human error in entering data accurately.
- The implementation of the Early Childhood Investment Zones for expansion funds presented a challenge as communities did not have the capacity to respond to Request for Proposals or submit an application for services.
- The New Mexico Early Learning Guidelines are being reviewed and PreK programs for PED and CYFD are currently piloting those revisions, feedback is provided on an ongoing basis and appropriate training and consultation is taking place with programs.

- Include Pre-K in the Infant/Early Childhood Mental Health Plan to address the Social-Emotional Development of Pre-K participants.
- Work in partnership with county and city governments and assist local community programs to develop the skills and infrastructure to respond to a Request for Proposal in compliance with state procurement regulations.
- Look at PreK options that can meet the needs of rural, isolated communities without the resources or needed number of children to start a PreK program.
- Share the CYFD Strategic Plan with PED.
- Implementation of Early Pre-K Program and PreK Mixed Age Pilot for three year olds as a strategy for improvement of Pre-K services.

Data Source / Methodology

- PreK1110 SOA Detail By Session Report from EPICS database along with the Prek Assessment Summary Measurements template.
- Numerator: Total number of children (CYFD - 4 y/o) showing measurable progress on Spring Assessment.
- Denominator: Total number of unique children evaluated through the Observational Assessment Tool.
**Causal and Contributing Factors Impacting Performance Measures**

- CYFD usually achieves this target, but has declined in performance over the last two quarters. This quarter dropped below the national standard is 95%. Children placed in out of state facilities and who are on runaway status present as challenges for caseworkers in making monthly contact. In addition, monthly qualitative case reviews that include interviews with workers, children, and foster parents find that typically monthly worker-child visits do occur but documentation in the case file is lacking, possibly resulting in diminished data quality for this measure.

**Resource Needs, Outcome Expectations and Timelines**

- PS needs to retain workers and provide coaching and supervision to improve the quality and quantity of child-worker visitation.
- Retention of staff and quick hiring to fill vacancies is needed to keep caseloads to a manageable size.
- Increase in number of available foster homes within the child’s communities to reduce travel time for caseworkers.
- Promote in state residential services to allow the child’s assigned caseworker to maintain contact with the child.
- Continued training and coaching for staff and trainers from NCCD for to improve worker skills around engagement with children to promote high quality visits.

**Data Source / Methodology**

- CYFD FACTS data system.

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**Percent of children in foster care who have at least one monthly visit with their caseworker**

<table>
<thead>
<tr>
<th>Year</th>
<th>Q4</th>
<th>Q3</th>
<th>Q2</th>
<th>Q1</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td>n/a</td>
<td>92.4%</td>
<td>94.2%</td>
<td>94.8%</td>
</tr>
</tbody>
</table>

**Desired Trend**

- FY18: 94.8%
- FY17: 94.8%
- FY16: 95.6%
- FY15: n/a
- FY14: n/a

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**Targeted Corrective Actions to Improve Performance**

- Emphasize importance of visiting children in foster care and documenting visits accurately during monthly meetings with Regional Managers and Field Deputy Director.
- Target counties who have fallen below to address causes for missed visits and plan for future visits.
- Regionally based coaching for worker and supervisors.
Causal and Contributing Factors

- Complex factors such as poverty, substance abuse, domestic violence, and mental health problems all contribute to the challenges faced by families that tend to have repeat substantiations in relatively short periods of time. Gaps in needed safety related services throughout the state create a barrier to providing needed services. Vacancy rates and worker turnover also impact this outcome. Experienced caseworkers with the training and skills to accurately assess safety and link families to needed services are critical to improve this outcome.

Targeted Corrective Actions to Improve Performance

- Improved staff retention and decreased vacancy rates. CYFD is improving organizational health to address turnover rates through consistent high quality supervision, workplace safety initiatives, and annual training. CYFD has expanded recruitment efforts with the universities and collaborated with State Personnel to streamline hiring processes.
- PS has hired a training director to oversee improved training efforts including focused attention on competency based foundation training for new employees, annual training for all employees, county based training and coaching, and specific supports to enhance supervisor competency. The division has identified and recruited 6 positions for regionally based coaches to ensure ongoing training and support to the field and supervisors. These coaches report directly to the PS training director.
- Ongoing evaluation of outcomes for contract providers including Family Support Worker contracts in 10 counties, Child Advocacy Centers, and others. Based upon evaluation of these contract services and identified gaps in service array, CYFD has restructured contracts for FY19 to ensure that contract providers can target the needed level of services to identified families. PS will prioritize contracts to counties where there are specific gaps in service array
- Improved safety and risk assessment and management. CYFD is partnering with the National Center on Crime and Delinquency (NCCD) Children’s Resource Center (CRC) to update to an evidence based safety assessment, validate and update the current risk assessment tool, and train all staff and supervisors in Safety Organized Practice (SOP). SOP is a core practice model developed to enhance the skills of child welfare workers in critical thinking, enhancing safety for children, and developing good working relationships with families. CYFD continues implementation efforts related to Safety Organized Practice (SOP). To date all supervisors have been trained in the fundamentals of SOP and the Safety Assessment Tool has been tested through formal inter-rater reliability testing. Currently the PS is engaged in state-wide field testing of the Safety Assessment Tool, updates to agency policy and procedure, and automation of the tools though a web-based platform hosted through NCCD.
- Improved family engagement with critical safety related services through a “warm-hand off” between PS, Families and Services providers. “Warm hand off” is the process of facilitating the engagement of families by the service provider with PS caseworkers in-person initiation of the referral.
- Access to safe, high quality childcare. CYFD provides fulltime childcare assistance for children determined to be at risk for abuse or neglect for 6 months.

Resource Needs, Outcome Expectations and Timelines

- PS continues to maintain in this outcome, but significant change related to new practice initiatives will take at least a year to be realized.
- Resources to improve administrative oversight of federal grants and contracts for protective services.
- Continued technical assistance from NCCD through full implementation of safety assessment to include ongoing training, coaching, and validation.

Data Source / Methodology

- CYFD FACTS data system.
The rate of placement moves (per day) for children in foster care during a 12 month period

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
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<tbody>
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<td>7.3</td>
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<td>FY13</td>
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Desired Trend

This is a duplicate of the Output measure:
Placement moves per 1,000 days of care provided to children who entered care during a rolling 12 month period and stayed for more than eight days.

A request to discontinue reporting was submitted for FY20.
Percent of children moved from foster care to permanent homes within 12 to 23 months of being in foster care

<table>
<thead>
<tr>
<th>Year</th>
<th>Q4</th>
<th>Q3</th>
<th>Q2</th>
<th>Q1</th>
<th>FY18</th>
<th>FY17</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td>38.0%</td>
<td>40.4%</td>
<td>38.3%</td>
<td>38.3%</td>
<td>40.4%</td>
<td>38.0%</td>
</tr>
<tr>
<td>FY18</td>
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<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
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</tbody>
</table>

Desired Trend

This is a duplicate of the Outcome measure:
Of children in foster care for 12-23 months at the start of a 12-month period, percent who achieve permanency within that 12 months

A request to discontinue reporting was submitted for FY20
### Percent of children who have another substantiated or indicated maltreatment report within 12 months of their initial report

<table>
<thead>
<tr>
<th></th>
<th>FY19</th>
<th>FY18</th>
<th>FY17</th>
<th>FY16</th>
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</tr>
<tr>
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<td></td>
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<td></td>
<td>n/a</td>
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</tr>
</tbody>
</table>

**FY19 Q4:**
- Q4: 14.2%
- Q3: 14.6%
- Q2: 14.7%
- Q1: 14.7%

**Desired Trend:**
- No trend data available.

---

This is a duplicate of the Outcome measure:

Of children who were victims of a substantiated maltreatment report during a 12-month period, what percent were victims of another substantiated maltreatment allegation within 12 months of their initial report.

A request to discontinue reporting was submitted for FY20.
**Percent of children who entered care 12 months ago who achieved permanency in less than 12 months**

<table>
<thead>
<tr>
<th>Year</th>
<th>Q4</th>
<th>Q3</th>
<th>Q2</th>
<th>Q1</th>
<th>Desired Trend</th>
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<tr>
<td>FY18</td>
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<td>28.3%</td>
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<td>FY17</td>
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<td>28.5%</td>
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</table>

This is a duplicate of the Outcome measure:
Of children in foster care for more than eight days, percent of children who achieve permanency within 12 months of entry into foster care

A request to discontinue reporting was submitted for FY20
Rate of maltreatment while in foster care

<table>
<thead>
<tr>
<th></th>
<th>FY19</th>
<th>FY18</th>
<th>FY17</th>
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<th>FY15</th>
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<td>8.2</td>
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</table>

Desired Trend

This is a duplicate of the Outcome measure: Maltreatment victimization per 100,000 days in foster care.

A request to discontinue reporting was submitted for FY20.
Percent of survivors/clients receiving domestic violence services who create a personalized safety plan with the support of agency staff prior to discharge from services

<table>
<thead>
<tr>
<th>Year</th>
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<th>Percentage</th>
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<tbody>
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<tr>
<td></td>
<td>Q3</td>
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<tr>
<td>FY15</td>
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<td>90%</td>
</tr>
<tr>
<td>FY14</td>
<td></td>
<td>81.4%</td>
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</tbody>
</table>

Desired Trend: 90%

Causal and Contributing Factors Impacting Performance Measures

- The data being collected is determined by on-site visits and desk reviews of safety plans each quarter, through a percentage of randomly selected cases and reported out to reflect the performance measure accurately. It is important to acknowledge that organizational capacity & skill differs between each DV provider across the state and PSD is working diligently on both systematic changes and individualized program changes to impact performance measures and the quality of services delivered to survivors and their children.

Targeted Corrective Actions to Improve Performance

- PSD implemented and issued universal safety planning guidelines in September 2018. These guidelines were developed with 13 DV providers’ insight and input and are now used by all DV providers across the state. The guidelines are designed to provide a more standardized process to ensure that safety is the first priority when working with survivors and children, and there is not a “one size fits all” plan. Each safety plan with a survivor or child should address their unique needs and situation. CYFD PSD and the NM Coalition Against Domestic Violence (NMCADV) will provide specific training and technical assistance to programs these programs quickly. Technical assistance includes identifying issues, barriers and to come up with adaptive solutions to not only meet the target but also to ensure that the safety to ensure safety plans are ultimately serving survivors and children by helping to keep them from harm.

- Data collected by PSD from multiple sources over the last two fiscal years has shown that it is imperative we cannot overlook organizational capacity in ensuring survivors and children are receiving quality services rooted in best practices. Capacity differs from agency to agency and region to region across the state. Issues associated with (but not limited to) staff turnover, workforce availability, supervision, in-house/out of house training, management oversight (including board of directors), funding resources and the community outlook all create barriers for families attempting to get crisis, out-patient or shelter services. In Quarter 2, ten agencies were reviewed, of those ten, 6 agencies well exceeded the performance measure, 2 met or nearly met the performance measure and two programs were significantly lower than the performance measure, which reduced the outcome measures for the entire state. In order to address this issue, PSD has collaborated with the NMCADV to develop a consulting program designed to assess and create individualized plans to grow and develop Domestic Violence organizations throughout the state. The NMCADV anticipates rollout of this program in late FY19.

Resource Needs, Outcome Expectations and Timelines

- More frequent desk reviews of safety planning, as well as on-site program reviews will allow the PSD program managers to more closely monitor progress, performance and provide individualized technical assistance and training needs to DV program staff.
- Continue to analyze competency gaps and needs in each community.
- Regular communication and coordination with the NMCADV and Coalition to Stop Violence Against Native Women (CSVANW) regarding individualized safety planning for each agency.
- CYFD and CSVANW have discussed and are anticipating to conduct joint on-site visits to provide more comprehensive support to agencies that serve native populations FY19.
- NMCADV rollout of Organizational Growth and Development Consultation services in late FY19.

Data Source / Methodology

- Domestic Violence Adult Victim/Survivor Survey.
- Windows: Domestic Violence Survey Window.
- Reports: Adult victims/survivors receiving domestic violence services who report they learned how to plan for their safety.
- Numerator: Number of DV adult victim/witnesses who reports they received information that helped them plan for their safety.
- Denominator: Number of DV adult victims/survivors surveyed.
- There was significantly fewer files reviewed in the second quarter of FY18 than there were in the first quarter, in order to more accurately assess this outcome a standardized process and sample size will be developed for this review.
Causal and Contributing Factors Impacting Performance Measure

It is important to acknowledge that parent readiness for reunification is critical for this measure. PS must be cautious in returning children before they or their parents have met their needs. Permanency Planning Caseloads are high. Cases are not moving toward permanency timely, particularly those with plans of Adoption. Caseworkers are not engaging with families as needed to assess progress related to case plans and safety threats.

Targeted Corrective Actions to Improve Performance

- Improved assessment and case planning through the life of the permanency case. PS is partnering with NCCD to train all permanency supervisors in the Collaborative Assessment and Planning (CAP) Framework. CAP is used in partnership with families and their network to assess risk and safety, develop case plans, and inform planning discussions. CAP focuses on needed behavior changes to demonstrate child safety. NCCD and Casey Family Programs are providing on-site coaching in county offices to support the implementation of this practice and increase the skills of permanency workers. Coaching on the CAP framework continues statewide and additional efforts to support and train supervisors around this practice a planned for the coming months. The CAP framework is being implemented as part of a required comprehensive case staffing required for every case at least every 90 days.
- Improved family engagement. Caseworkers are now required to visit with parents in their place of residence monthly to engage them in working toward resolution of safety threats. Emphasis is being placed on County Office Managers to monitor visits for each caseworker.
- Improved services for families. Contracts for services for families will be reviewed to determine their impact on helping parents address issues that prevent them from safely caring for their children.
- Reduce case load for permanency workers. Pending adoption and guardianship cases will be completed to free caseworkers to work with biological parents. CYFD has made targeted efforts to move children to permanency and reduce caseloads including monthly executive staffing to identify and address barriers. CYFD has collaborated with the judiciary to ensure timely hearings and finalization of adoptions. 74 adoptions were finalized during the May 2018 adoption event.
- Improved well-being for children in care. PS will continue to partner with Managed Care Organizations to ensure that medical, behavioral and dental needs for children are addressed while in foster care and support is provided to biological parents to maintain their children in their home safely once they are returned. PSD is partnering with the Capacity Building Center for States to develop implementation strategies to re-invigorate CYFD’s version of the medical passport program, a well-being record provided to foster parents, to ensure caregivers have the needed information to ensure each child’s physical, dental, mental health and educational needs are met.
- Results Oriented Management (ROM) interface will allow the field to more closely monitor their progress and improvement. A new ROM report was developed to assist managers, supervisors, and staff identify cases due for the 90 day staffing. Development is underway to add a ROM report to track the data related to worker/parent visits.
- Minimize gaps in the service array. PS continues to collaborate with the Behavioral Health Division to analyze service needs and service array gaps in communities and target contracts to those communities with the most need.
- Improvement in this outcome will be incremental as new practices are implemented with a new cohort of children entering care.

Resource Needs, Outcome Expectations and Timelines

- Continued collaboration with NCCD for staff training and coaching. Improved skills around assessment, engagement, and case planning skills are needed to facilitate timely reunification.
- Collaboration with the judiciary to reduce caseloads by moving children in care to permanency primarily those with plans of adoption. Collaboration with the judiciary to finalize adoptions.
- YA FACTS Data System.
- Like many PS measures, reunification and/or permanency in 12 months outcomes are measured using a 12-month cohort of children entering foster care. For this particular measure, the entry cohort is a year earlier than the other permanency outcomes to allow for accurate measure of its companion measure, re-entries into foster care for children who achieve reunification within 12 months of entry. For example, the children in SFYQ2’s reporting cohort will have entered care between January and December 2015. Efforts to improve timeliness to permanency that have been enacted since that year would have little to no impact on this outcome for...
Maltreatment victimizations per 100,000 days in foster care

FY19 Target: 8.0

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<th>Q3</th>
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<td>FY14</td>
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Data Source / Methodology

- CYFD FACTS data system.
- The new measure related to maltreatment in foster care measures this outcome much differently from the previous measure. The previous measure counted, in the numerator, the number of victimizations of children in which the perpetrator is identified as a licensed foster care provider. In the new measure, the rate is calculated using the number of substantiated reports that are made while the child is placed in foster care, regardless of the role of the perpetrator. Currently, allegations that occur prior to the child’s placement in foster care are often still screened in for investigation, and will impact this measure even if the perpetrator no longer has access to the child.

Causal and Contributing Factors Impacting Performance Measures

- This measure is highly susceptible to a decrease in performance with only a small number of children in foster being maltreated. PS has traditionally done very well in this measure. The Research Assessment and Data (RAD) Bureau completed a case review of all substantiated cases involving children in foster care closed between April 1, 2017 and March 31, 2018. There were 105 cases reviewed with 190 alleged victims. Of the cases reviewed 22% involved incidents that occurred prior to the child’s entry into foster care. Often these reports were made after the child disclosed previous maltreatment to a foster parent, PS worker, therapist, or forensic interviewer.

Targeted Corrective Actions to Improve Performance

- CYFD continues efforts to support foster parents through improved foster parent training and support. PS has implemented specific foster parent annual training requirements to equip foster parents to effective parent children with complex trauma histories and other special needs.

Resource Needs, Outcome Expectations and Timelines

- Continue to work on licensing and recruitment of quality foster homes to care for the increasing numbers of children.
- Increase funding for Care and Support to ensure financial resources are available to reimburse foster and adoptive families for the multiple expenses incurred by children in foster care.
Placement moves per 1,000 days of care provided to children who entered care during a rolling 12 month period and stayed for more than eight days

<table>
<thead>
<tr>
<th>FY18</th>
<th>Q4</th>
<th>FY17</th>
<th>FY16</th>
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<td>n/a</td>
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</tbody>
</table>

Desired Trend

Causal and Contributing Factors Impacting Performance Measure

• The factors impacting placement stability are very complex, including the number of available foster families and over placement, the ability to effectively match the children in care with the foster parent most able to meet their needs, the role of relative and kin caregivers, the needs of children coming into foster care who frequently have complex histories of trauma and special needs, and the array of services available to meet the needs of foster children and foster parents.

Targeted Corrective Actions to Improve Performance

• PS has released a Request for Proposal to develop an automated FC Provider Module. This module will streamline the application process for prospective foster parents, improve the agency’s ability to manage applications and ongoing homes, reliably track foster parent training requirements, and provide data analytics related to target foster parent recruitment and placement matching.
• Improved initial and ongoing foster parent training to enhance the capacity of foster parents to meet the needs of children in care, including curriculum related to trauma and safe-sleep. In addition, PS provides blended RAFT training for new foster parents and resource information for all providers available on a secure web-based training platform, as well as regionally based placement specialist that can be assigned to support individual foster care providers when there are specific training needs to maintain the placement.
• Targeted Quality Assurance Reviews of provider records to evaluate compliance with federal and state licensing requirements and development of county based program improvement plans when areas needing improvement are identified.
• Targeted Quality Assurance Reviews of provider records to evaluate compliance with federal and state licensing requirements and development of county based program improvement plans when areas needing improvement are identified.

Resource Needs, Outcome Expectations and Timelines

• Continue to promote placement with relatives when they are deemed safe. Focus on the necessary shift in culture related to engaging relatives as placement options and connections for children in foster care. CYFD is partnering with the Capacity Building Center for States to improve outcomes related to relative placement. A Relative Placement workgroup has been formed with statewide representation with the goal to develop and implement a relative care program to better engage families at case inception and strengthen agency buy-in of the value of keeping children and families connected
• Continue to train on Results Oriented Management Interface (ROM) and the PS Placement Dashboard to allow County Office Managers to more closely monitor their progress and improvement.
• Promote participation in the Striving Toward Excellence Program (STEP) to teach participants from around the state to use data and research to inform decision-making and improve outcomes.
• Implement the Statewide Foster Care and Recruitment plan to increase the number of foster care resources for older children and children with complex needs.

Data Source / Methodology

• CYFD FACTS data system.
• Note: Child and Families Services review has changed how this item is measured. This is the current measure, which counts moves rather than children. With this measure, PS is accountable for each move a child entering foster care experiences, rather than just counting children who have had more than two moves within their first year of foster care.
PROTECTIVE SERVICES

Turnover rate for protective services workers (quarterly rolling 12 month, state fiscal year)

<table>
<thead>
<tr>
<th></th>
<th>Q4</th>
<th>Q3</th>
<th>Q2</th>
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<tbody>
<tr>
<td>FY19</td>
<td></td>
<td></td>
<td>28.2%</td>
<td>28.1%</td>
</tr>
<tr>
<td>FY18</td>
<td>26.3%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY17</td>
<td>25.0%</td>
<td></td>
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<td></td>
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<tr>
<td>FY16</td>
<td>29.7%</td>
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<td></td>
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<td>26.4%</td>
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Desired Trend

FY19 Target: 20%

Objectives

• Decrease the turnover rate for Protective Services Workers.

Causal and Contributing Factors Impacting Performance Measure

• Protective Services work is extremely difficult and in all service areas workers are faced with high case loads, long work hours, requirements for on call work, and exposure to the significant trauma that the families they are working with experience. Nationally, turnover of protective services workers is high and New Mexico is no exception.

Targeted Corrective Actions to Improve Performance

• PS hired a new training director. The goal is to revamp the Foundation of Practice to be more skill based and role specific. Coaches were hired for each region and will provide local training on specific focus areas as well as coaching for staff to improve practice.
• Supervision for staff continues to be a key area of focus. Supervisors are required to meet monthly with workers for the purpose of coaching, readiness for work, moral, etc.
• The agency continues to address staff concerns identified in the Annual Organizational Health Survey related to worker safety, including improved security at offices and in parking lots, automated safety alerts, and phone tethers that can be activated in the field to notify law enforcement of an emergency.
• Rapid hire event streamline the hiring process to fill vacancies in a timely manner in an effort to manage caseloads for all staff.

Resource Needs, Outcome Expectations and Timelines

• Develop a recruitment plan to attract qualified professionals to child welfare.
• Consider hiring someone to lead the recruitment effort.

Data Source / Methodology

• Separations considered are not due to death, dismissal or retirement.
• Figures are cumulative.
• Note that beginning in FY17, CYFD is using a new, more accurate methodology for determining PSD field worker and JJS YCS-1 worker turnover rates. Detailed information about this methodology can be found in the "Review of Methodologies for Determining Turnover Rates" document at https://cyfd.org/about-cyfd/publications-reports.
Of children in foster care for 24+ months at the start of a 12-month period, percent who achieve permanency within that 12 months

Causal and Contributing Factors
• CYFD has maintained recent progress in this measure over the past quarter. High caseloads for permanency planning workers and our CCAs have impacted timely adoption. There are high number of children with plans of Adoption who need to be moved toward permanent placement more expeditiously.

Resource Needs, Outcome Expectations and Timelines
• Caseloads for all services provided by PS are high and there is a need to move cases to permanency
• Legal resources are needed to address the backlog of cases, including close collaboration with the judiciary.
• Adoption consultants need to be hired and trained.
• It is anticipated that this measure will fluctuate over the coming quarters as more “backlog” cases (children in care 24+ months) are moved to permanency. Long term these efforts will result in improvement for this outcome as caseloads are reduced and the strain on the courts is lessened.
• Guardianship Assistance Program training continues to be provided to PS staff and attorneys; other legal partners.

Data Source / Methodology
• CYFD FACTS Data System.
• Note the Child and Family Services Review has changed how this item is measured.
• This is an exit cohort measure and progress will be incremental until the adoption backlog is addressed. Ongoing agency efforts to achieve permanency for children already in care for 24 months will cause this measure to get worse before it gets better.

Targeted Corrective Actions to Improve Performance
• CYFD met this target
Of children in foster care for 12-23 months at the start of a 12-month period, percent who achieve permanency within that 12 months

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<th>FY19</th>
<th>Q4</th>
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<th>Q2</th>
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<td>40.4%</td>
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<td></td>
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<td>38.3%</td>
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<td>Desired Trend</td>
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Causal and Contributing Factors Impacting Performance Measure

• It is important to acknowledge that parent readiness for reunification is critical for this measure. PS must be cautious in returning children before they or their parents have met their needs. Permanency Planning Caseloads are high. Cases are not moving toward permanency timely, particularly those with plans of Adoption and reunification can be delayed as the result of the complex needs of the families and gaps in the service array, including in-patient substance abuse treatment, comprehensive mental health services, and housing.

Targeted Corrective Actions to Improve Performance

• Improved family engagement. Caseworkers are now required to visit with parents in their place of residence monthly to engage them in working toward resolution of safety threats. Emphasis is being placed on County Office Managers to monitor visits for each caseworker.
• Improved services for families. Contracts for services for families will be reviewed to determine their impact on helping parents address issues that prevent them from safely caring for their children.
• Reduce case load for permanency workers. Pending adoption and guardianship cases will be completed to free caseworkers to work with biological parents. CYFD has made targeted efforts to move children to permanency and reduce caseloads including monthly executive staffing to identify and address barriers. CYFD has collaborated with the judiciary to ensure timely hearings and finalization of adoptions.
• Improved well-being for children in care. PS will continue to partner with Managed Care Organizations to ensure that medical, behavioral and dental needs for children are addressed while in foster care and support is provided to biological parents to maintain their children in their home safely once they are returned. PSD is partnering with the Capacity Building Center for States to develop implementation strategies to re-invigorate CYFD’s version of the medical passport program, a well-being record provided to foster parents, to ensure caregivers have the needed information to ensure each child’s physical, dental, mental health and educational needs are met.

Resource Needs, Outcome Expectations and Timelines

• Continued collaboration with NCCD for staff training and coaching. Improved skills around assessment, engagement, and case planning skills are needed to facilitate timely reunification.
• Collaboration with the judiciary to reduce caseloads by moving children in care to permanency primarily those with plans of adoption. Collaboration with the judiciary to finalize adoptions.
• Results Oriented Management (ROM) interface will allow the field to more closely monitor their progress and improvement. A new ROM report was developed to assist managers, supervisors, and staff identify cases due for the 90 day staffing. Development is underway to add a ROM report to track the data related to worker/parent visits.
• Minimize gaps in the service array. PS continues to collaborate with the Behavioral Health Division to analyze service needs and service array gaps in communities and target contracts to those communities with the most need.
• Improvement in this outcome will be incremental as new practices are implemented with a new cohort of children entering care.

Data Source / Methodology

• CYFD FACTS data system.
Of children who were victims of a substantiated maltreatment report during a 12-month period, what percent were victims of another substantiated maltreatment allegation within 12 months of their initial report

<table>
<thead>
<tr>
<th>Year</th>
<th>Q4</th>
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<tbody>
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<td>14.2%</td>
<td>14.6%</td>
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Desired Trend: 14.7% (FY17 and FY18), 14.2% (Q2 FY19), 14.6% (Q1 FY19)

FY19 Target: 10%

Causal and Contributing Factors Impacting Performance Measure

- Complex factors such as poverty, substance abuse, domestic violence, and mental health problems all contribute to the challenges faced by families that tend to have repeat substantiations in relatively short periods of time. Gaps in needed safety related services throughout the state create a barrier to providing needed services. Vacancy rates and worker turnover also impact this outcome. Experienced caseworkers with the training and skills to accurately assess safety and link families to needed services are critical to improve this outcome.

Targeted Corrective Actions to Improve Performance

- Improved staff retention and decreased vacancy rates. CYFD is improving organizational health to address turnover rates through consistent high quality supervision, workplace safety initiatives, and annual training. CYFD has expanded recruitment efforts with the universities and collaborated with State Personnel to streamline hiring processes.
- PS has hired a training director to oversee improved training efforts including focused attention on competency based foundation training for new employees, annual training for all employees, county based training and coaching, and specific supports to enhance supervisor competency. The division has identified and recruited 6 positions for regionally based coaches to ensure ongoing training and support to the field and supervisors. These coaches report directly to the PS training director.
- Ongoing evaluation of outcomes for contract providers including Family Support Worker contracts in 10 counties, Child Advocacy Centers, and others. Based upon evaluation of these contract services and identified gaps in service array, CYFD has restructured contracts for FY19 to ensure that contract providers can target the needed level of services to identified families. PS will prioritize contracts to counties where there are specific gaps in service array.
- Improved safety and risk assessment and management. CYFD is partnering with the National Center on Crime and Delinquency (NCCD) Children’s Resource Center (CRC) to update to an evidence based safety assessment, validate and update the current risk assessment tool, and train all staff and supervisors in Safety Organized Practice (SOP). SOP is a core practice model developed to enhance the skills of child welfare workers in critical thinking, enhancing safety for children, and developing good working relationships with families. CYFD continues implementation efforts related to Safety Organized Practice (SOP). To date all supervisors have been trained in the fundamentals of SOP and the Safety Assessment Tool has been tested through formal inter-rater reliability testing. Currently the PS is engaged in state-wide field testing of the Safety Assessment Tool, updates to agency policy and procedure, and automation of the tools through a web-based platform hosted through NCCD.
- Improved family engagement with critical safety related services through a “warm-hand off” between PS, Families and Services providers. “Warm hand off” is the process of facilitating the engagement of families by the service provider with PS caseworkers in-person initiation of the referral.
- Access to safe, high quality childcare. CYFD provides fulltime childcare assistance for children determined to be at risk for abuse or neglect for 6 months.

Resource Needs, Outcome Expectations and Timelines

- PS continues to maintain in this outcome, but significant change related to new practice initiatives will take at least a year to be realized.
- Resources to improve administrative oversight of federal grants and contracts for protective services.
- Continued technical assistance from NCCD through full implementation of safety assessment to include ongoing training, coaching, and validation.

Data Source / Methodology

- CYFD FACTS data system.
Objective

• Decrease the turnover rate for youth care specialists (YCS).

Causal and Contributing Factors Impacting Performance Measure

• There were 5 Youth Care Specialist I separations during FY 2019 Q1 for a 2.8% turnover rate which is below the cumulative target rate of 18%. The number of separations for last year FY18 Q1 was 15 compared to 5 in FY19 Q1 which is a decrease of 67% in turnover from the prior year.
• There were 11 Youth Care Specialist I separations during FY 2019 Q2 for a 6.3% turnover rate which is below the cumulative target rate of 18%. However, the number of separations for last year FY18 Q2 was 20 compared to 11 in FY19 Q2 which is a decrease of 45% in turnover from the prior year.
• Cumulatively for Q1 and Q2 in FY19, JJS has seen a 54% reduction in YCS I turnovers compared to Q1 and Q2 for FY18.
• This is a very difficult job that provides frequent mental challenges, long hours, and the potential for assault. Often staff have the heart and desire to try and help these youth but then realize that they are not the right fit for this type of environment. Even with a smaller population, the high turnover rate combined with those who are out on Workman’s Comp, FMLA, Military Leave, Annual/Sick leave, etc., require that staff must work overtime to cover mandated posts.
• JJS has created a salary matrix to guarantee that applicants receive appropriate pay based on their education and related experience. This, however, has created a somewhat significant pay disparity between new staff and senior staff who often have more experience. It is not uncommon that the YCS series is used as an entry level position to gain experience and then seek promotional/pay increase opportunities in other segments of state government.
• YCS-1’s provide direct client services within the secure facilities. The turnover rate for YCS-1’s is a concern for the program as it can negatively impact the JJS budget in the form of overtime expenses, recruitment and training expenses, travel and per diem expenses, pre-employment screening expenses and contractual services expenses due to nursing vacancies.
• The cost of hiring and training one YCS is approximately $15,000 or the equivalent of nearly six months of their salary.

Desired Trend

<table>
<thead>
<tr>
<th>Year</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
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<td>22.4%</td>
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<td>FY16</td>
<td>18.3%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY17</td>
<td>20.6%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY18</td>
<td>30.8%</td>
<td></td>
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</tr>
</tbody>
</table>

Turnover rate for youth care specialists

Resource Needs, Outcome Expectations, and Timelines

• As the above-referenced initiatives are implemented, it is anticipated that turnover rate will improve based on increased sense of confidence and skill performing job tasks, employee satisfaction and decreased burnout.

Data Source / Methodology / Notes

• Data source: SHARE (analysis conducted by CYFD Human Resources).
• This measure is cumulative.
• Numerator: Number of separations. Separations are defined as being either “transfers out of CYFD” (to other state agencies)” or “regular terminations that are not attributed to dismissals, retirements, deaths, reduction in force, and misconduct.”
• Denominator: Number of full time employees (FTEs) budgeted.

Targeted Corrective Actions to Improve Performance

• Not applicable
**Objective**

- Increase the percent of clients who successfully complete formal probation through the provision of rehabilitative services.

**Causal and Contributing Factors Impacting Performance Measure**

- The target for this measure was raised from 84% in FY18 to 85% in FY19. At the end of FY19 Q2, 85.3% of the clients discharging from probation did so successfully. This was just slightly over the target of 85%.

**Targeted Corrective Actions to Improve Performance**

- Not applicable.

**Resource Needs, Outcome Expectations, and Timelines**

- Higher risk/need youth within the Juvenile Justice system often require community treatment which in some communities does not exist or is limited. For the past few years, Juvenile Probation has also piloted a Probation Agreement statewide that focuses more on risk factors and community safety. The final form and rule is awaiting final approval from the Supreme Court and should reduce the amount of unsuccessful discharges for technical violations from formal supervision. Juvenile Justice Services is also looking at selecting a new Risk and Needs tool to assist in adjudication decisions.

**Data Source / Methodology**

- This was a new measure for FY15 which changed past methodology by looking at successful completion vs. completion and where the denominator is clients completing probation vs. being released from probation. FY14 is used as a baseline.
- Data source: FACTS (MS Access Query: Additions and Releases).
- Numerator: Clients completing formal probation, including ICJ or Tribal Compact Probation, with a satisfactory release type only. Clients with a release reason of New Juvenile Probation, Continued on Supervision, Adult Sentence, New Juvenile Commitment and Returned to Facility are excluded. Denominator: Clients completing formal probation, including ICJ or Tribal Compact Probation. Clients with a release reason of Death, Early Release from Supervision, Expiration of Time or Other are included. Clients with a release reason of New Juvenile Probation, Continued on Supervision, Adult Sentence, New Juvenile Commitment and Returned to Facility are excluded, as well as clients with a release type of New Formal Disposition and Revoked.
- This measure is cumulative.
Number of client-to-staff battery incidents

Objective
• Reduce the number of client-to-staff battery incidents in JJS facilities.

Causal and Contributing Factors Impacting Performance Measure
• From FY 2016 to FY 2018, the number of physical assaults decreased:
  • From FY18 Q2 to FY19 Q2, the average daily population has decreased approximately 14%.
  • FY18 Q2 saw 21 client-on-staff assaults. FY19 Q2 had 18 assaults which represents about a 14% decrease.
  • Client-on-staff assaultive incidents accounted for about 36% of all physical assaults.
  • CNYC had 8 client-on-staff physical assaults (44%).
  • 10 unique clients were responsible for the 18 assaults. 13 (72%) of the assaults were committed by 5 (50%) of the clients. 2 clients (20%) committed 7 (39%) of the assaults.

Resource Needs, Outcome Expectations, and Timelines
• JJS is utilizing additional staff coverage and Behavioral Management Services (BMS). The extra staffing allows for additional support/security for the client as well as staff. BMS services are provided with the goal of increasing youths’ ability to function effectively with positive life, social, and behavioral skills. A trained BMS provider provides 1:1 services through coaching and training.
• JJS has been strengthening the collaboration between Field and Facility Services so intake staff have more complete information about the client at reception. Additionally, interdepartmental and inter-facility communication is being evaluated to ensure client classification is appropriate and client needs are being addressed. This will ensure that client placement suits both the needs of the client and the strengths of the assigned unit.
• JJS is has implemented Behavior Change Contracts to address low level rule violations. The resolution and/or points assigned and consequently earned back by good behavior are reviewed for fairness and accountability and signed by a supervisor.
• For clients who do assault staff, they must be held legally accountable for such actions.
• Staffing patterns must be re-assessed to ensure an adequate relief factor to address injury, illness, light duty, and other leave.

Data Source / Methodology / Notes
• Data source: FACTS Incident Module (MS Access Query: Facility Production Queries).
• Definition: Number of unique physical assault (battery) facility incidents with a hearing disposition of “guilty.”
• This measure is cumulative.
• Incidents are duplicated when an incident involves multiple clients.
• Includes client-on-staff incidents only.

Targeted Corrective Actions to Improve Performance
• Not applicable.
Objective

• Maintain a safe environment for youth in CYFD custody by reducing substantiated complaints by clients of abuse and/or neglect.

Causal and Contributing Factors Impacting Performance Measure

• The target for this measure in FY16 was 32.7%. The performance measure for this target was moved down to 15% for FY17, reduced to 7.5% for FY18 and now sits at 8% for FY19.
• During FY19 Q2, there were 4 allegations of abuse or neglect in JJS facilities but none were substantiated.
• The Office of the Inspector General has sole responsibility for investigating these types of complaints.

Targeted Corrective Actions to Improve Performance

• Not applicable.

Resource Needs, Outcome Expectations, and Timelines

• All CYFD JJS secure facilities and reintegration centers have been certified by a federal auditor as PREA compliant. Our certification confirm CYFD/JJS’ ongoing commitment to providing a safe and secure environment, free from all forms of sexual misconduct and retaliation for clients and employees.

Data Source / Methodology / Notes

• Data sources: CYFD Office of the Secretary, Office of the Inspector General.
• Numerator: Number of substantiated abuse and/or neglect complaints involving a youth at a juvenile justice facility.
• Denominator: Total number of abuse and/or neglect complaints involving youth at a juvenile justice facility.
• This measure is cumulative.
• Youth may be duplicated if there is more than one complaint involving the youth during the evaluation period.
• This was a new measure for FY15. This information is generated by the Office of the Secretary, Office of the Inspector General as they are tasked by Stand Alone Procedure 02 (SAP02) with investigating these types of complaints.

During the second quarter of FY19:
• Number of calls = 6
• Calls screened in for investigation = 3
• Calls screened out to a grievance officer = 3
• Investigations substantiated = 0

Percent of substantiated complaints by clients of abuse or neglect in juvenile justice facilities

<table>
<thead>
<tr>
<th>Year</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Desired Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td>0.0%</td>
<td>0.0%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY18</td>
<td>10.7%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY17</td>
<td>9.5%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY16</td>
<td>2.9%</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>FY15</td>
<td>10.7%</td>
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<td></td>
</tr>
<tr>
<td>FY14</td>
<td>n/a</td>
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</tbody>
</table>

FY19 Target: 8.0%
Percent of incidents in juvenile justice services facilities requiring use of force resulting in injury

<table>
<thead>
<tr>
<th>FY19</th>
<th>Q4</th>
<th>1.7%</th>
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<tbody>
<tr>
<td>Q3</td>
<td></td>
<td>1.6%</td>
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<tr>
<td>Q2</td>
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<td>2.2%</td>
</tr>
<tr>
<td>Q1</td>
<td></td>
<td>1.9%</td>
</tr>
<tr>
<td>FY18</td>
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<td>FY17</td>
<td></td>
<td>1.7%</td>
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<td>FY16</td>
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<td>1.6%</td>
</tr>
<tr>
<td>FY15</td>
<td></td>
<td>1.7%</td>
</tr>
<tr>
<td>FY14</td>
<td></td>
<td>2.2%</td>
</tr>
</tbody>
</table>

Desired Trend

Objective

• Effectively de-escalate incidents and/or behaviors to avoid injuries that result from the use of force.

Causal and Contributing Factors Impacting Performance Measure

• For FY19 Q1, there were 6 incidents in which injuries were reported out of 314 use of force incidents. This represents a 16% drop in the number of use of force incident resulting in injury and a 33% decrease in the number of injuries for FY19 Q1 to Q2. 3 incidents occurred at CNYC, and 1 at YDDC. In 4 of the incidents, 5 staff were injured. In 3 of the incidents, 3 clients were injured with one client injuring themselves:
  o Injury to client – bloody nose
  o Injury to client – small scratches behind his neck
  o Injury to staff – staff sustained multiple punches to left side of face and head
  o Injury to client – bump on left elbow
• For Q2 we actually reached the target of 1.5% (4/265) but as a cumulative measure we have had 10 injuries out of 579 incidents for a rate of 1.7%.

Targeted Corrective Actions to Improve Performance

• Every use of force is reviewed by the facility’s Incident Review Committee. This committee is tasked with reviewing all incidents in their facility, providing a report on their review with findings and any necessary recommendations, and delivering that report to the facility Superintendent in a timely manner. A Level 2 review will be conducted if any areas of concern are identified. Review of these incidents did not identify any matters that required that they be submitted for Level 2 review.
  • In January 2014, a procedure was implemented that allowed JJS facility clients and others to report to CYFD allegations of staff abuse, neglect or other complaints about facility staff, other employees, contractors or volunteers, or services or treatment provided to clients. This procedure was updated in 2016 to be compliant with PREA requirements.
  • Additionally, the procedure established a toll-free JJS Facility Confidential Reporting Number (1-855-563-5065) to provide clients with an additional way to report allegations of abuse and neglect and to file grievances. The toll-free number is also available for others (e.g., JJS staff, ex-clients, and family members) to report allegations of abuse and neglect of clients in JJS facilities.

Resource Needs, Outcome Expectations, and Timelines

• Statutory changes are needed to ensure that Youth Care Specialist are afforded the rights and protections of peace officers.
• Additionally, JJS Leadership will continue to explore ways to enhance staff’s ability to facilitate groups. Groups are an important part of the treatment process because it allows members to accept responsibility and accountability for both program and group activities and to engage in problem-solving processes.

Data Source / Methodology / Notes

• Numerator: Number of disciplinary incidents resulting in injury from use of force.
• Denominator: Number of disciplinary incidents.
• This measure is cumulative.
• Incidents are duplicated in the numerator and denominator when a single incident involves more than one client.
• Data source: FACTS Incident Module (MS Access Query: Facility Production Queries).
Objective

• Reduce recidivism rates for clients discharging from field supervision or from commitment.

Causal and Contributing Factors Impacting Performance Measure

• Clients who discharged from either field or facility formal supervision with a complete break in service were monitored for recidivating events that occur within two years following the client’s discharge date. Recidivism is defined as an adjudication in the juvenile system or a conviction in the adult justice system for a delinquent/criminal act that occurred following their discharge from Juvenile Justice Services supervision. The most recent four fiscal year quarters of discharges which can be monitored for a two year evaluation period are reported on each fiscal quarter.
• During FY19 Q2, the Field recidivism rate was 20.4%, not meeting the FY 2019 target of 12.0%.

Targeted Corrective Actions to Improve Performance

• It is difficult to assess what the casual/contributing factors might be that are influencing these rates as they represent clients that were committed or supervised by JJS, released in calendar year 2016, and had a recidivating event in the following 2 years. Clients on formal probation tend to not take advantage of services following the ending of their formal supervision period which contributes to the higher number recidivating. Field Services will explore how to leverage Juvenile Justice Advisory Committee (JJAC) programming around the state to continue to provide supports and opportunities for clients no longer under formal supervision.

Data Source / Methodology / Notes

• Definition: Youth who discharged from either field or facility formal supervision with a complete break in service are monitored for recidivating events that occur within two years following the youth’s discharge date. Recidivism is defined as an adjudication in the juvenile system or a conviction in the adult justice system for a delinquent/criminal act that occurred following their discharge from JJS supervision. The most recent four fiscal year quarters of discharges which can be monitored for a two year evaluation period are reported on each fiscal quarter.
• Numerator = The number of youth from the discharges cohort who had a recidivating event within two years of their discharge from formal supervision.
• Denominator = The total number of youth identified in the discharges cohort being monitored.
• Notes: This measure is cumulative.
• Data Sources: FACTS
  Administrative Offices of the Court
• Data Validity: The FACTS case management system is used uniformly throughout all facilities.
• Data Reliability: Continuous methodology.
• 45% of field recidivism occurred in the Juvenile Justice System. 55% occurred in the Adult Justice System.
JUVENILE JUSTICE SERVICES

Recidivism rate for youth discharged from commitment

<table>
<thead>
<tr>
<th>FY19</th>
<th>Q4</th>
<th>Q3</th>
<th>Q2</th>
<th>Q1</th>
<th>Desired Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>FY19 Target: 34.0%</td>
</tr>
<tr>
<td>FY18</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>FY17</td>
<td>n/a</td>
<td>n/a</td>
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</tr>
<tr>
<td>FY16</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
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<tr>
<td>FY15</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>FY14</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
</tbody>
</table>

Objective

- Reduce recidivism rates for clients discharging from field supervision or from commitment.

Causal and Contributing Factors Impacting Performance Measure

- Clients who discharged from either field or facility formal supervision with a complete break in service were monitored for recidivating events that occur within two years following the client’s discharge date. Recidivism is defined as an adjudication in the juvenile system or a conviction in the adult justice system for a delinquent/criminal act that occurred following their discharge from Juvenile Justice Services supervision. The most recent four fiscal year quarters of discharges which can be monitored for a two year evaluation period are reported on each fiscal quarter.
- The FY19 Q2 Facility recidivism rate was 47%, above the FY 2019 target of 34%.

Targeted Corrective Actions to Improve Performance

- It is difficult to assess what the casual/contributing factors might be that are influencing these rates as they represent clients that were committed or supervised by JJS, released in calendar year 2016, and had a recidivating event in the following 2 years.

- JJS continues to look for programming options which focus on the social development of young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their individual strengths. Recently we have implemented yoga and mindfulness training and at the end of September, we opened our new vocational building at YDCC/CNYC with current classes in welding and construction. Additionally, we graduated 62 clients who earned either their High School Diploma or their GED. A College and Career Fair was held October 17th for all clients at YDCC/CNYC and 19 vendors participated.
- Two areas of programming that have been vital to our juvenile justice system are reintegration and transitional services. Collaboratively working with the youth, their families, JJS staff (field and facility), community providers, and other natural supports to prepare youth for re-entry into their communities provides a proper balance of social control and service provision to better address the needs youth and reduce recidivism amongst the most high-risk.
- Reintegration has placed more of a focus on employment for the clients entering the centers which has provided more stability when the youth return to the community. Juvenile Justice has also increased programming for clients that are in the center. The Supervised Release period requires only 90 days of continued supervision which may sometimes hamper the long term work that is sometimes needed for clients that have been in commitment. Transition Services continues to work to fill this gap and helps to connect clients with community services that can support them past the age of 21.

Data Source / Methodology / Notes

- Definition: Youth who discharged from either field or facility formal supervision with a complete break in service are monitored for recidivating events that occur within two years following the youth’s discharge date. Recidivism is defined as an adjudication in the juvenile system or a conviction in the adult justice system for a delinquent/criminal act that occurred following their discharge from JJS supervision. The most recent four fiscal year quarters of discharges which can be monitored for a two year evaluation period are reported on each fiscal quarter.
- Numerator = The number of youth from the discharges cohort who had a recidivating event within two years of their discharge from formal supervision.
- Denominator = The total number of youth identified in the discharges cohort being monitored.
- Notes: This measure is cumulative.
- Data Sources: FACTS Administrative Offices of the Court
- Data Validity: The FACTS case management system is used uniformly throughout all facilities.
- Data Reliability: Continuous methodology.
- 10% of facility recidivism occurred in the Juvenile Justice System. 90% occurred in the Adult Justice System.
Objective

• Reduce the number of clients who may enter an adult corrections facility through improved JJS facility programs, reintegration, transition services and supervised release.

Causal and Contributing Factors Impacting Performance Measure

• This measure reports on a very narrow subset of population whom JJS serves. However, with this being said, there has been a marked increase in the number of youth these past two quarters who transitioned to DOC within the past 2 years.

Targeted Corrective Actions to Improve Performance

• Research tells us that young adults (18-24 yoa) are more likely to engage in risky behavior and are more vulnerable to peer pressure while simultaneously seeking autonomy from family/caregivers. They are more impulsive, less able to control emotions and less likely to consider future consequences of their actions.
• Incorporating evidence based practices into our facilities, research tells us that the best way to reduce recidivism and improve outcomes is:
  • Criminal Thinking – We attempt to address the causes of criminal thinking and behavior through treatment modalities such as Cognitive Behavioral Therapy (CBT).
  • Education – we offer an array of educational programs from credit recovery, high school credits, GED, vocational/certification programming and also post-secondary educational opportunities.
  • Employment – Within the secure facilities we offer vocational/certification, life skills programming, and porter (paid) responsibilities in order to enhance job-readiness skills. The reintegration centers have also focused more on ensuring that clients have support and access to employment but we need to work on finding ways to equip our clients with the skills and tools to secure long-term employment.
  • Mental Health and Substance Abuse – JJS has a behavioral health therapist assigned to every unit. Various modalities, techniques, and tools are utilized for substance abuse treatment at all facilities. These treatments are preceded with a comprehensive diagnostic evaluation and ongoing assessment occurs throughout the life of the treatment.
  • Transition – We utilize transition coordinators to support clients in finding housing, developing life skills, and connecting them to community resources and positive peers/adults to help support their success.

Resource Needs, Outcome Expectations, and Timelines

• Focus on utilizing the reintegration centers as a step-down for clients entering supervised release. The Supervised Release period requires only 90 days of continued supervision. For some clients, this period of Supervised Release does not provide sufficient duration of service provision or social control needed to facilitate their successful reintegration. Juvenile Justice Services continues to be down one reintegration center which prevents youth in a Reintegration Center being placed closer to their family and natural supports.

Data Source / Methodology / Notes

• Data source: FACTS (Batch File: sm14-05); MOU with Department of Corrections.
  • Numerator: Number of clients age 18 and older discharged from a JJS facility during a quarter two years ago that appear in the NMCD inmate population during the following two years. Denominator: Number of clients age 18 years and older discharged from a JJS facility during a quarter two years ago.
  • This measure is cumulative.
  • Data Validity: The FACTS case management system is used uniformly throughout all facilities. MOU in effect with Department of Corrections. Tiered match on last name, first name, DOB and SSN.
  • Data Reliability: Continuous methodology.
JUVENILE JUSTICE SERVICES

Percent of clients with improvement in reading on standardized pre- and post-testing

<table>
<thead>
<tr>
<th>FY19</th>
<th>Q4</th>
<th>45.8%</th>
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<tbody>
<tr>
<td>Q2</td>
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<tr>
<td>FY18</td>
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<td>63.6%</td>
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<tr>
<td>FY17</td>
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<td>61.1%</td>
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<td>FY16</td>
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<td>59.3%</td>
</tr>
<tr>
<td>FY15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY14</td>
<td>n/a</td>
<td></td>
</tr>
</tbody>
</table>

Desired Trend: n/a (reported semiannually)

Objective

- Utilize the T.A.B.E. or Test for Adult Basic Education pre and post-test achievement for math, reading and language of all youth attending the three CYFD JJS high schools located on the grounds of secure JJS facilities tracking academic progress in Math, Reading and Language.

Causal and Contributing Factors Impacting Performance Measure

- In order to have an appropriately sized dataset for reporting on, this measure is reported on bi-annually in Q2 and Q4. The T.A.B.E performance methodology defines a target growth score as a client upon discharge testing at the 8th grade level or above in math, reading and language on the T.A.B.E. post-test. Additionally, many of our clients come to us far below 8th grade level and due to the limited time they are in our care, measuring grade attainment may not represent their academic progress.

Targeted Corrective Actions to Improve Performance

- Instructional Coach has been trained on how to extract data
  a. We can view individual student growth
  b. See overall student data by class
  c. Data is aligned to grade level common core standards
- Instructional Coach will provide professional development to school staff on how to retrieve data, pull reports, and analyze data so that teachers of all content can support student growth in Language Arts/Reading.
- The professional development will continue in content team meetings (PLC’s) in order to drive instruction and analyze both individual and whole class data
- Use reports that include the following information to determine where a student is currently and what we will do to move the students forward and make learning gains:
  Reading: Retell and Interpret Information
  a. Make predictions; draw inferences
  b. Critical thinking skills
  c. Reading: phonics, vocabulary, comprehension
  d. Literature and media
- Last year’s Reading Horizons was purchased to help support student growth in Language Arts. Due to student schedules we found we were unable to provide the Reading Horizons intervention to a wide range of students. The Reading Horizon materials are still available as a resource and will be used on a case by case basis for individual students.

Resource Needs, Outcome Expectations, and Timelines

- NM CYFD Juvenile Justice Services is now utilizing a new methodology for reporting reading, math and language scores progress using testing for Adult Basic Education or T.A.B.E. testing. This assessment measures academic skills and does not have the limitations observed in NWEA testing as every student has an entrance and exit exam that can be
- For FY20, the LFC has requested that we once again start reporting NWEA scores.

Data Source / Methodology / Notes

- Numerator: Number of clients that met or exceeded their target growth score.
- Denominator: Number of clients with an entry target growth score for the period being evaluated.
- Data source: Target growth scores established by T.A.B.E. normalization studies. The attainment of grade level 8 and above on the T.A.B.E. exit test.
- Given the limitations of NWEA and T.A.B.E. testing methodologies, CYFD suggests that, it might be a better approach to look at high school diploma and equivalency attainment as an indicator of educational success. JJS is working on developing what these rates should be.
### Percent of clients with improvement in math on standardized pre- and post-testing

<table>
<thead>
<tr>
<th>Year</th>
<th>Q2</th>
<th>Q4</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td>60.0%</td>
<td>60.0%</td>
</tr>
<tr>
<td>FY18</td>
<td>40.9%</td>
<td>32.2%</td>
</tr>
<tr>
<td>FY17</td>
<td>57.9%</td>
<td>60.7%</td>
</tr>
<tr>
<td>FY16</td>
<td>57.9%</td>
<td>60.7%</td>
</tr>
<tr>
<td>FY15</td>
<td>60.0%</td>
<td>60.0%</td>
</tr>
<tr>
<td>FY14</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

**Desired Trend:** n/a (reported semiannually)

### Objective

- Utilize the T.A.B.E. or Test for Adult Basic Education pre and post-test achievement for math, reading and language of all youth attending the three CYFD JJS high schools located on the grounds of secure JJS facilities tracking academic progress in Math, Reading and Language.

### Causal and Contributing Factors Impacting Performance Measure

- In order to have an appropriately sized dataset for reporting on, this measure is reported on bi-annually in Q2 and Q4. The T.A.B.E performance methodology defines a target growth score as a client upon discharge testing at the 8th grade level or above in math, reading and language on the T.A.B.E. post-test. Additionally, many of our clients come to us far below 8th grade level and due to the limited time they are in our care, measuring grade attainment may not represent their academic progress.

### Targeted Corrective Actions to Improve Performance

- Instructional Coach has been trained on how to extract data.
  - We can view individual student growth.
  - See overall student data by class.
- Instructional Coach will provide professional development to school staff on how to retrieve data, pull reports, and analyze data so that teachers of all content can support student growth in math.

- The professional development will continue in content team meetings (PLC’s) in order to drive instruction and analyze both individual and whole class data.

- Use reports that include the following information to determine where a student is currently and what we will do to move the students forward and make learning gains:
  - Math: Every license of NWEA Growth includes tests for Algebra I and Algebra II and Integrated Math I, II and III as well as Geometry. The pre-requisite content which is included, and adapting to each student’s learning level allows for these specific tests to offer a personalized assessment experience that provides immediate insights into the student’s strengths and weaknesses.
  - Foothill High School, YDDC Campus has been using the ST Math program and showed significantly better Math scores in NWEA than the other two schools in the district. It was purchased to help support student growth in Math and the results are showing promise when looking at NWEA Math data. While student schedules have posed the same challenges with the implementation of Reading Horizons program we have been able to provide this Math intervention to a wide range of students because it is provided in the math class and the students are able to use this as a supplement while getting credit at the same time.
  - FHS math achievement shows effectiveness of ST Math Program.

### Resource Needs, Outcome Expectations, and Timelines

- NM CYFD Juvenile Justice Services is now utilizing a new methodology for reporting reading, math and language scores progress using testing for Adult Basic Education or T.A.B.E. testing. This assessment measures academic skills and does not have the limitations observed in NWEA testing as every student has an entrance and exit exam that can be

### Data Source / Methodology / Notes

- **Numerator:** Number of clients that met or exceeded their target growth score.
- **Denominator:** Number of clients with an entry target growth score for the period being evaluated.
- **Data source:** Target growth scores established by T.A.B.E. normalization studies. The attainment of grade level 8 and above on the T.A.B.E. exit test.
- **Given the limitations of NWEA and T.A.B.E. testing methodologies, CYFD suggests that, it might be a better approach to look at high school diploma and equivalency attainment as an indicator of educational success. JJS is working on developing what these rates should be.
Number of physical assaults in juvenile justice facilities

<table>
<thead>
<tr>
<th></th>
<th>Q4</th>
<th>Q3</th>
<th>Q2</th>
<th>Q1</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td></td>
<td></td>
<td>120</td>
<td>70</td>
</tr>
<tr>
<td>FY18</td>
<td>284</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY17</td>
<td>398</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY16</td>
<td>448</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY15</td>
<td>374</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY14</td>
<td>346</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Desired Trend

**Objective**

- Reduction in physical assault incidents.

**Causal and Contributing Factors Impacting Performance Measure**

- It should be noted that FY18 experienced a 29% decline in the volume of physical assault incidents when compared to FY17. FY17 had also experienced a 2% decline in the volume of physical assault incidents when compared to FY16 and represents the first decline in numbers since FY13.
- For FY19 Q1, the number of physical assaults was 70 which is a decrease of 35 or -33% over FY18 Q1 (105).
- From FY18 Q1 to FY19 Q1, the average daily population has decreased approximately 12%.
- Of the total physical assaults, 74.3% were committed by clients aged 17 and younger while 25.7% were aged 18 and older.
- For FY19 Q2, the number of physical assaults was 50 which is a decrease of 20 or 36% of FY18 Q2 (78).
- From FY18 Q2 to FY19 Q2, the average daily population has decreased approximately 14%.
- Of the total physical assaults, 50% were committed by clients aged 17 and younger while 50% were aged 18 and older.

**Targeted Corrective Actions to Improve Performance**

- Not applicable.

**Resource Needs, Outcome Expectations, and Timelines**

- JJS has been strengthening the collaboration between Field and Facility Services so intake staff have more complete information about the client at reception. Additionally, interdepartmental and inter-facility communication is being evaluated to ensure client classification is appropriate and client needs are being addressed. This will ensure that client placement suits both the needs of the client and the strengths of the assigned unit.
- Juveniles committed to facilities exhibit higher risk and higher needs and require resources that often do not exist, or have been exhausted, in the community.
- For clients who do assault staff, they must be held legally accountable for such actions.
- Staffing patterns are being evaluated to ensure an adequate relief factor to address injury, illness, light duty, and other leave.

**Data Source / Methodology / Notes**

- Data source: FACTS Incident Module (MS Access Query: Facility Production Queries).
- Definition: Number of unique physical assault (battery) facility incidents with a hearing disposition of “guilty.”
- This measure is cumulative.
- Incidents are duplicated when an incident involves multiple clients.
- Includes client-on-client, client-on-staff, and client-other incidents.
- Notes:
  - While there is not official target or requirement for reporting on this measure, a sub-set of these incidents includes client on client physical assaults. For FY18 ended with 211 client on client physical assaults which is less than the unofficial target of <275. This is a decrease of 23% from FY17. For FY19 Q1, there were 48 client-on-client assaults and for FY19 Q2 there were 34 for a cumulative total of 82.
  - Within the current fiscal year of 2019, JPTC had the most (41) client-on-client physical assault incidents, followed by CNYC (22), YDDC (17), with both ABRC and SJDC (1).
  - For FY19 Q2, there were 26 unique clients involved in the 34 assaults.
Objective

- Increase the percent of clients who successfully complete supervised release (parole) through the provision of rehabilitative services.

Causal and Contributing Factors Impacting Performance Measure

- JJS has been able to divert clients appropriately to prevention services and away from probation and commitment and as a result, overall commitments to secure facilities made up about 1 percent of all juvenile justice dispositions. Juveniles committed to facilities exhibit higher risk and higher needs and require resources that often do not exist in their communities. As has been the historical trend, JJS has not met the target set forth. Our current target for this performance measure is 70%. Given that this measure focuses on our most difficult and complex clients, a re-evaluation of the appropriateness of this target is in order.
- However, since FY16 Q4, we have seen the percentage of successful supervised release discharges trending slightly upward from 51.4% in FY16 Q4 to 62.5% in FY19 Q2.

Targeted Corrective Actions to Improve Performance

- Secure facilities and reintegration teams continue to collaborate on ways we can enhance the handoff between the facilities to lower anxiety for the client and increase their opportunity for success.
- As part of our FY19 strategic efforts, secure facilities and reintegration teams will continue to use Reintegration Centers as a step-down facility in order to assist youth who are placed on Supervised Release to be successful in their transition back to their community by assisting them in gaining the appropriate life skills, employment, education, and connecting them to services and resources to assist them long term. Clients within all of the centers have been able to learn great life skills by working and then with the money they are able to save they have a better chance at realizing the successes they can achieve and gain the confidence to live independently. JJS is focusing on placing the clients at the center that are the most appropriate and would have a greater chance at success.
- Transition Services continues to focus on our most high risk/need clients which are the Youthful Offenders and 18 year and older population. These clients often lack the supports in the community and are in the greatest need of supportive services. Transition Services partners with youth, families, JJS facility staff, juvenile probation officers, and other team members in transition plan development to identify access with community providers. Transition Services explores independent living options to assist with our older client population to be successful upon completing their formal Supervision period and has also begun a pilot program to provide a small stipend to Supervised Release clients that are meeting specific goals.
- Many Supervised Release clients are also referred to and participate in Juvenile Community Corrections which focuses on case management as well as life skills. The Community Corrections program is available in all but two NM counties. Community Corrections workers have the ability to assist with transportation needs for our clients as well as job training which is a huge need for our client population. These and other Community resources are used to provide additional Life Skills training to assist clients when they return back home or obtain their own residence.

Data Source / Methodology / Notes

- Numerator: Number of clients completing supervised release with a satisfactory release type only.
- Denominator: Number of clients completing supervised release.
- Data source: FACTS (MS Access Query: Additions and Releases).
- This measure is cumulative.
- Youth may be duplicated if there is more than one supervised release for a commitment episode or if there are consecutive commitments.
Percent of youth receiving community-based and juvenile detention center behavioral health services who perceive that they are doing better in school or work because of the behavioral health services they have received.

<table>
<thead>
<tr>
<th>FY19</th>
<th>Q4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

(Reported annually)

**FY19 Target:** 83%

### Objective
- To determine and track youth satisfaction with the impact of behavioral health interventions on the major life domain of school or work.

### Causal and Contributing Factors Impacting Performance Measure
- Perceived quality of behavioral health services accessed by youth.
- As a result of anonymous surveys, for FY16, 81% of youth perceived that they are doing better in school or work because of the behavioral health services they have received. Of these, 108 of 142 (76.1%) youth in facilities believed this to be true and 82 of 93 (88.2%) of youth in the community did as well.

### Targeted Corrective Actions to Improve Performance
- During FY17 and FY18, BHS targeted youth in JJS secure facilities, representing some of the highest need youth served by the system, and youth placed in facility-based shelters, representing youth experiencing homeless and high-need situations. In FY19, BHS intends to target a broader array of youth involved in community behavioral health services with varying needs and circumstances.
- In FY’19, BHS intends to revise its means of administering the survey, as a paper survey limits the number of youth participants. BHS is actively participating in the BH Collaborative Consumer Satisfaction Survey workgroup to explore alternative means of administering and collecting youth satisfaction data.

### Data Source / Methodology / Notes
- This is an annual survey conducted during the late summer/early fall of the year on a randomly selected group of youth who receive behavioral health services. Data is collected and analyzed by CYFD-BHS each year and an annual report produced for which the data on this measure is drawn. Data for the above was pulled from the larger data set of the survey. Data for FY14 and FY15 was collected and analyzed by UNM.
- Data for FY17 was collected through face to face contact with youth who had received behavioral health services during the previous year. At the time of the survey these youth reside in shelter programs, CYFD/JJS commitment programs, Transitional Housing, or are members of the LUVYA’NM CYFD-Protective Services Youth Advisory group. All anonymously completed paper and pencil survey instruments.
- We will not have data for FY17 until the late fall of 2017.
- Notes:
  * The trend data for the community-based population is not comparable to the previous years, as previous years were based upon telephone surveys of a random selected cohort and FY17’s is based upon face to face interviews of participants in CYFD/BHS Healthy Transitions grant and members of LUVYA’NM. The “n” for the community-based population in FY17’s survey is only 34 – not allowing any determination that is statistically significant. The “n” for Juvenile Justice Facility population was 85 for FY17.
  ** For FY18, the Youth Satisfaction Survey was administered to youth placed at facility-based shelters or JJS secured facilities. The “n” for the FY18 survey was 157. For FY19, CYFD BHS is revising the means for administering the survey, to expand survey to a broader array of youth involved in community behavioral health services.
Objective

- Track the effectiveness of the infant mental health (IMH) services provided to families and infants in CYFD custody. It measures subsequent referrals to Protective Services after recommended unification has taken place. Infant Teams have the professional knowledge to observe when a child and the bio-parent(s) are ready for a successful reunification. In those cases when a re-referral occurs means that either the child or the bio-parents either were not ready, or circumstances unable to be reasonably predicted took place.

Causal and Contributing Factors Impacting Performance Measure

- Maltreatment interferes with the establishment of the mother-infant bond that encourages security and growth promoting development. Early relationship building interventions can safeguard children from harm and promote learning and development. Any small shift in interactions from negative to positive can make a difference. The research and perspectives of interdisciplinary fields indicate that all domains of development—social-emotional, intellectual, language and physical are interdependent and supported through the dynamics of the caregiving environments.

Targeted Corrective Actions to Improve Performance

- IMH database housed at UNM Continuing Education, Early Childhood Service Center; direct information request sent to Infant Teams clinicians from all judicial districts served; and Protective Service Division, Research Assessment and Data Unit. To assure the quality and reliability of the data, two independent data sources were consulted (IMH database and clinicians). A third independent source (Protective Service, Data Unit) was consulted to check the existence of re-referrals once the universe of FY16 reunification recommendations was established.

- Please note that with such a small “n” the percentages could vary widely and the results have little external validity and cannot be generalized.

Percent of infants served by infant mental health teams with a team recommendation for unification that have not had additional referrals to protective services

<table>
<thead>
<tr>
<th>Year</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td></td>
<td>100%</td>
<td></td>
<td>100%</td>
</tr>
<tr>
<td>FY18</td>
<td></td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY17</td>
<td></td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY16</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY15</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Desired Trend

FY19 Target: 92%
**Objective**

CYFD involved children, youth & families receive timely and appropriate services that address their specific Behavioral Health and Substance Use Disorder needs

**Causal and Contributing Factors Impacting Performance Measure**

- Ongoing CBHC position vacancies impact CBHC availability to collaborative with PS staff.
- CBHCs have recently expanded services to the Protective Services population. These relationships, protocols and policies are still under development, so referrals to CBHCs have been slower than anticipated as Protective Services staff learn about the roles and responsibility of the CBHCs. The BHS leadership team has engaged in several meetings with each PS office to develop internal protocols for referrals. CBHC and PS have consistently had ongoing discussions regarding the CBHC role. Because of the PS staff turnover, the leadership team felt it would be ideal to sit down again and revamp the protocol and instructions for PS workers. The team is developing more of visual tools such as a flow chart and identifying when to bring a CBHC into a case as a more user friendly method of educating staff. The team will meet again in February 2019.
- BHS continues to develop processes and protocols for tracking the data sources and has identified gaps in its tracking protocols. The BHS data analyst developed a tool to search FACTS system in more depth, to obtain a more accurate picture regarding CBHC’s efforts with the target populations.
- BHS has identified gaps in compliance with existing protocols for JJS and PS referrals to CBHCs. BHS established an ongoing meeting with JJS leadership to address existing policies and procedures. BHS Deputy Director and CBHC Supervisors will continue to meet with Chief JPOs and Supervisors to address the use of CBHCs and mandatory referrals. BHS Deputy Director is also meeting with CBHC Supervisors to review policies and procedure to ensure referral and FACTS assignments are completed appropriately.

**Targeted Corrective Actions to Improve Performance**

- As a result of meetings with PS leadership, the target population has shifted, tailoring referrals to the need of each office.
- DENOMINATOR is all youth receiving Juvenile Justice Services throughout the state who have:
  1**. Been denied previously recommended Out of Home Placement (OHP) and/or
  2**. Are a threat to themselves or others, and/or
  3. Are in detention, and/or
  4. Are homeless, and/or
  5. Have sexual perpetration allegations, and/or
  6. Are 12 years old or younger, and/or
  7. Are at risk of OHP, and/or
  8. Will have an OHP discharge within 45 days, and/or
  9. Also have an open Juvenile Justices case

**Data Source / Methodology / Notes**

- FACTS
- BHD_PM.xlsx
- bh_Invoices_Shelter.xlsx
- The NUMERATOR is the number of cases (in the denominator) referred to CBHCs throughout the state by Juvenile Justice and Protective Services staff.
  a. Tracked via CBHC Assignment list
  b. Tracked via FACTS and ADE entries of CBHCs activity notes.

**Percent of children, youth and families department involved children and youth in the estimated target population that are receiving services from community behavioral health clinicians**

<table>
<thead>
<tr>
<th>Year</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY18</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY17</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY16</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY15</td>
<td>n/a</td>
<td></td>
<td></td>
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<tr>
<td>FY14</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Desired Trend: 75%
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## CYFD Key Measures at a Glance

### EARLY CHILDHOOD SERVICES

<table>
<thead>
<tr>
<th>Measure</th>
<th>FY18</th>
<th>FY19 Q1</th>
<th>FY19 Q2</th>
<th>FY19 Q3</th>
<th>FY19 Q4</th>
<th>FY19 Final</th>
<th>FY19 Target</th>
<th>Desired Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of licensed child care providers participating in high quality programs</td>
<td>38.2%</td>
<td>39.9%</td>
<td>40.5%</td>
<td></td>
<td></td>
<td></td>
<td>35%</td>
<td>▲</td>
</tr>
<tr>
<td>Percent of children receiving subsidy in high quality programs</td>
<td>59.9%</td>
<td>67.5%</td>
<td>66.4%</td>
<td></td>
<td></td>
<td></td>
<td>53%</td>
<td>▲</td>
</tr>
<tr>
<td>Percent of families receiving home visiting for six months or longer (excluding home visiting level two), that have one or more protective services substantiated abuse or neglect referrals</td>
<td>1.94%</td>
<td>0.25%</td>
<td>0.95%</td>
<td></td>
<td></td>
<td></td>
<td>n/a</td>
<td>▼</td>
</tr>
<tr>
<td>Percent of children receiving state childcare subsidy with substantiated abuse or neglect during the child care assistance participating period</td>
<td>1.18%</td>
<td>0.47%</td>
<td>0.73%</td>
<td></td>
<td></td>
<td></td>
<td>1.3%</td>
<td>▼</td>
</tr>
<tr>
<td>Percent of families receiving home visiting services for at least six months that have one or more protective services substantiated abuse or neglect referrals during the participating period</td>
<td>1.94%</td>
<td>0.25%</td>
<td>0.95%</td>
<td></td>
<td></td>
<td></td>
<td>5.0%</td>
<td>▼</td>
</tr>
<tr>
<td>Percent of parents participating in home visiting who demonstrate progress in practicing positive parent-child interactions</td>
<td>45.2%</td>
<td>45.1%</td>
<td>44.6%</td>
<td></td>
<td></td>
<td></td>
<td>40%</td>
<td>▲</td>
</tr>
<tr>
<td>Percent of children in CYFD funded pre-kindergarten showing measurable progress on the school readiness fall-preschool assessment tool</td>
<td>94.9%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(reported annually)</td>
<td>93%</td>
<td>▲</td>
</tr>
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### PROTECTIVE SERVICES

<table>
<thead>
<tr>
<th>Measure</th>
<th>FY18</th>
<th>FY19 Q1</th>
<th>FY19 Q2</th>
<th>FY19 Q3</th>
<th>FY19 Q4</th>
<th>FY19 Final</th>
<th>FY19 Target</th>
<th>Desired Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of children in foster care who have at least one monthly visit with their caseworker</td>
<td>94.8%</td>
<td>94.2%</td>
<td>92.4%</td>
<td></td>
<td></td>
<td></td>
<td>n/a</td>
<td>▲</td>
</tr>
<tr>
<td>Percent of children who are not the subject of substantiated maltreatment within six months of a prior determination of substantiated maltreatment</td>
<td>89.4%</td>
<td>89.4%</td>
<td>89.0%</td>
<td></td>
<td></td>
<td></td>
<td>93%</td>
<td>▲</td>
</tr>
<tr>
<td>The rate of placement moves (per day) for children in foster care during a 12 month period</td>
<td>6.9</td>
<td>7.3</td>
<td>7.5</td>
<td></td>
<td></td>
<td></td>
<td>n/a</td>
<td>▼</td>
</tr>
<tr>
<td>Percent of children moved from foster care to permanent homes with 12 to 23 months of being in foster care.</td>
<td>40.4%</td>
<td>38.3%</td>
<td>38.3%</td>
<td></td>
<td></td>
<td></td>
<td>n/a</td>
<td>▲</td>
</tr>
<tr>
<td>Percent of children who have another substantiated or indicated maltreatment report within 12 months of their initial report</td>
<td>14.7%</td>
<td>14.6%</td>
<td>14.2%</td>
<td></td>
<td></td>
<td></td>
<td>n/a</td>
<td>▼</td>
</tr>
<tr>
<td>Percent of children who entered care 12 months ago who achieved permanency in less than 12 months</td>
<td>28.5%</td>
<td>27.6%</td>
<td>28.3%</td>
<td></td>
<td></td>
<td></td>
<td>n/a</td>
<td>▲</td>
</tr>
<tr>
<td>Rate of maltreatment while in foster care</td>
<td>16.4</td>
<td>17.4</td>
<td>14.7</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of survivors/clients receiving domestic violence services who create a personalized safety plan with the support of agency staff prior to discharge from services</td>
<td>89.5%</td>
<td>96.7%</td>
<td>81.4%</td>
<td></td>
<td></td>
<td></td>
<td>90%</td>
<td>▲</td>
</tr>
<tr>
<td>Of children in foster care for more than eight days, percent of children who achieve permanency within 12 months of entry into foster care.</td>
<td>28.5%</td>
<td>27.6%</td>
<td>28.3%</td>
<td></td>
<td></td>
<td></td>
<td>42%</td>
<td>▲</td>
</tr>
<tr>
<td>Maltreatment victimizations per 100,000 days in foster care</td>
<td>16.4</td>
<td>17.4</td>
<td>14.7</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Placement moves per 1,000 days of care provided to children who entered care during a rolling 12 month period and stayed for more than eight days.</td>
<td>6.9</td>
<td>7.3</td>
<td>7.5</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Turnover rate for protective services workers (quarterly rolling 12 month measure, state fiscal year)</td>
<td>26.3%</td>
<td>28.1%</td>
<td>28.2%</td>
<td></td>
<td></td>
<td></td>
<td>20%</td>
<td>▼</td>
</tr>
<tr>
<td>Of children in foster care for 24+ months at the start of a 12-month period, percent who achieve permanency within that 12 months</td>
<td>28.2%</td>
<td>37.0%</td>
<td>38.3%</td>
<td></td>
<td></td>
<td></td>
<td>32%</td>
<td>▲</td>
</tr>
</tbody>
</table>
## CYFD Key Measures at a Glance

<table>
<thead>
<tr>
<th>Measure</th>
<th>FY18</th>
<th>FY19 Q1</th>
<th>FY19 Q2</th>
<th>FY19 Q3</th>
<th>FY19 Q4</th>
<th>FY19 Final</th>
<th>FY19 Target</th>
<th>Desired Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Of children in foster care for 12-23 months at the start of a 12-month period, percent who achieved permanency within that 12 months</td>
<td>40.4%</td>
<td>38.3%</td>
<td>38.3%</td>
<td></td>
<td></td>
<td></td>
<td>44%</td>
<td></td>
</tr>
<tr>
<td>Of children who were victims of a substantiated maltreatment report during a 12-month period, what percent were victims of another substantiated allegation within 12 months of their initial report</td>
<td>14.7%</td>
<td>14.6%</td>
<td>14.2%</td>
<td></td>
<td></td>
<td></td>
<td>10%</td>
<td></td>
</tr>
</tbody>
</table>

### JUVENILE JUSTICE SERVICES

<table>
<thead>
<tr>
<th>Measure</th>
<th>FY18</th>
<th>FY19 Q1</th>
<th>FY19 Q2</th>
<th>FY19 Q3</th>
<th>FY19 Final</th>
<th>FY19 Target</th>
<th>Desired Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turnover rate for youth care specialists</td>
<td>30.8%</td>
<td>2.8%</td>
<td>9.1%</td>
<td></td>
<td></td>
<td></td>
<td>18%</td>
</tr>
<tr>
<td>Percent of clients who successfully complete formal probation</td>
<td>85.6%</td>
<td>83.8%</td>
<td>85.3%</td>
<td></td>
<td></td>
<td></td>
<td>85%</td>
</tr>
<tr>
<td>Number of client-to-staff battery incidents</td>
<td>81</td>
<td>25</td>
<td>43</td>
<td></td>
<td></td>
<td>&lt; 130</td>
<td></td>
</tr>
<tr>
<td>Percent of substantiated complaints by clients of abuse or neglect in juvenile justice facilities</td>
<td>10.7%</td>
<td>0.0%</td>
<td>0.0%</td>
<td></td>
<td></td>
<td></td>
<td>8.0%</td>
</tr>
<tr>
<td>Percent of incidents in juvenile justice services facilities requiring use of force resulting in injury</td>
<td>1.3%</td>
<td>1.9%</td>
<td>1.7%</td>
<td></td>
<td></td>
<td></td>
<td>1.5%</td>
</tr>
<tr>
<td>Recidivism rate for youth discharged from active field supervision</td>
<td>n/a</td>
<td>20.1%</td>
<td>20.4%</td>
<td></td>
<td></td>
<td></td>
<td>12.0%</td>
</tr>
<tr>
<td>Recidivism rate for youth discharged from commitment</td>
<td>n/a</td>
<td>42.2%</td>
<td>47.0%</td>
<td></td>
<td></td>
<td></td>
<td>34%</td>
</tr>
<tr>
<td>Percent of juvenile justice division facility clients age 18 and older who enter adult corrections within two years after discharge from a juvenile justice facility</td>
<td>6.9%</td>
<td>22.6%</td>
<td>27.0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of clients with improvement in reading on standardized pre-and post-testing</td>
<td>63.6%</td>
<td>45.8%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of clients with improvement in math on standardized pre-and post-testing</td>
<td>40.9%</td>
<td>32.2%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of physical assaults in juvenile justice facilities</td>
<td>284</td>
<td>70</td>
<td>120</td>
<td></td>
<td></td>
<td>&lt; 300</td>
<td></td>
</tr>
<tr>
<td>Percent of clients successfully completing term of supervised release</td>
<td>59.3%</td>
<td>66.7%</td>
<td>63.8%</td>
<td></td>
<td></td>
<td></td>
<td>70%</td>
</tr>
</tbody>
</table>

### BEHAVIORAL HEALTH SERVICES

<table>
<thead>
<tr>
<th>Measure</th>
<th>FY18</th>
<th>FY19 Q1</th>
<th>FY19 Q2</th>
<th>FY19 Q3</th>
<th>FY19 Final</th>
<th>FY19 Target</th>
<th>Desired Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of youth receiving community-based and juvenile detention center behavioral health services who perceive that they are doing better in school or work because of the behavioral health services they have received</td>
<td>72.0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>83%</td>
</tr>
<tr>
<td>Percent of infants served by infant mental health programs that have not had re-referrals to Protective Services Division</td>
<td>91%</td>
<td>100%</td>
<td>100%</td>
<td></td>
<td></td>
<td></td>
<td>92%</td>
</tr>
<tr>
<td>Percent of children, youth and families department involved children and youth in the estimated target population that are receiving services from community behavioral health clinicians</td>
<td>n/a</td>
<td>26.4%</td>
<td>49.9%</td>
<td></td>
<td></td>
<td></td>
<td>75%</td>
</tr>
</tbody>
</table>

*Note: The trend data for the community-based population is not comparable to the previous years as previous years were based upon telephone surveys of a random selected cohort and 2017’s is based upon face to face interviews of participants in CYFD/BHS Healthy Transitions grant and members of LUVYANM. The “n” for the community-based population in this year’s survey is only 34 – not allowing any determination that is statistically significant. The “n” for Juvenile Justice facility population was 85 for 2017.