



New Mexico
Children Youth and
Families Department

2020-2021

Annual Progress & Service Plan

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<http://cyfd.org/about-cyfd/publications-reports>.

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1. Collaboration

Collaboration

In developing the 2020-2024 CFSP, PSD has engaged in meaningful collaboration with a broad range of key stakeholders, including both institutional and community partners. Input for the 2020-2024 CFSP was solicited from community providers, tribal representatives, legal entities, youth, foster parents, relative foster parents, caseworkers, etc. CYFD will continue to host feedback sessions on progress to the CFSP and APSR yearly. Surveys have been and are currently being developed to receive feedback from foster parents and parents yearly. Much of the collaboration have included the following:

Intergovernmental Collaboration

The new Governor has required all Cabinet Secretaries to work collaboratively to improve the lives of the residents of New Mexico. The Children's Cabinet is comprised of all the Cabinet Secretaries for agencies touching the lives of children. Significant progress has been made regarding Behavioral Health Services for Children with the Cabinet Secretary for CYFD, Human Services and Department of Health chairing the Behavioral Health Collaborative. The Behavioral Health Director for CYFD is the interim CEO for the Behavioral Health Collaborative and will represent the needs of the children within CYFD. The Public Education Department and CYFD are co-chairing a taskforce on educational stability for children in foster care.

CYFD is meeting monthly with all universities in the state to discuss improved collaboration with the goal of increasing the number of social work graduates choosing to work with CYFD.

House Joint Memorial 10 requires CYFD to convene a taskforce to make recommendations on improvements with foster parents. This taskforce will make recommendations for a Foster Parent Advisory Council. CYFD met with groups of foster parents to provide feedback for the CFSP. Town hall meetings will continue to occur with the first being held in Bernalillo County on 8/29/19 with approximately 50 foster parents participating. Feedback from this group was extremely positive regarding the shift in the relationship between CYFD and foster parents. Rates for foster parents are currently being reviewed as well as loosening the controls for incidental payments for children in foster care. Training for foster parents continues to be revised and moved to the training division of CYFD. A website is also being created to share resources for foster parents and improve communication.

Foster and Adoptive Parents

PSD engages and provides support for foster and adoptive parents by providing quality training and information, and hosting two annual conferences.

In July of 2019, PSD partnered with NMSU and foster and adoptive parents to discuss how to hold the annual foster and adoptive parent conferences. Due to the current Covid-19 pandemic and the public health crisis, we have made decision to cancel the in-person 2020 CYFD Resource Family Conference for Foster, Adoptive and Relative Families planned for this spring. We are exploring options for providing some of the conference content via webinar and other online learning opportunities. We began these webinars with holding a workshop with Casey Family Programs, Albuquerque Bar Association and Generations United, as they presented on The Value of Kinship Caregiving and Honoring Family Connections in Trying Times.

In developing this final report, Protective Services held regional town hall meetings hosted by PSD regional managers. Each regional manager presented data to foster parents in their region on the CFSR and PIP initiatives, as well as updates from their regions. There was also a question and answer session for foster parents.

Currently, PSD supports foster and adoptive parents by partnering with New Mexico State University and the Capacity Building Center for States (CBCS) to develop training for foster parents, and host two yearly statewide conferences. Recent training topics have included grief and loss, maintaining sibling and relative connections and trauma. Trainings and conference workshops are presented in both English and Spanish.

In preparing the 2020-24 CFSP, PSD held regional town hall meetings hosted by PSD managers. Each regional manager presented data regarding the CFSR and PIPs, as well as updates from their regions, and facilitated a question and answer session.

In the coming years, PSD will continue to provide post-decree support services for adoptive families through the Fiesta Program, which is contracted through All Faiths. These services will be discussed in the Service Description section.

Feedback from Foster and Adoptive Parents Regarding Strengths and Gaps in Service

Foster and adoptive parents also reported that they felt that the online and in-person relative, adoptive, foster parent training (RAFT) covered only basic information, and would like more training on topics such as trauma. Other stakeholders noted that they participated in a Trauma and Developing Brain training, done in conjunction with CYFD, which they felt was the best training. Another noted that the Trust-Based Relational training was very helpful as it provided practical tools. Some stakeholders described RAFT as having good information and being well laid out while also noting that interaction with staff and other foster parents is more critical to learning. In some cases the handouts did not follow the slides, stakeholders noted, and there was some miscommunication about the training. Parents expressed a need for more practical trauma-informed skills, as opposed to rudimentary disciplinary tactics. Stakeholders noted that Fiesta trainings were helpful, with one saying that it was the best resource for foster/adoptive parents, and another saying they would not “have made it the first year without Fiesta (Family Activities, Information, Education, Support, and Training).” (Developed by a group of adoption professionals to support adoptive parents, Fiesta provides services to any adoptive family,

including biological children with adopted siblings. Fiesta addresses issues such as grief and loss, difficult behavior, race and culture, and mental health.

Noting that people preparing to become foster parents previously had to provide respite care to another child before receiving a placement, stakeholders felt that type of hands-on experience would have been more helpful than a training. Stakeholders noted that trainers should have experience as foster parents themselves. They suggested that experienced foster parents could come in to the training for Q and A. One foster parent had to find child care for twelve hours of training, and did not find the training helpful “on a daily basis.” Foster parents need practical tools that work, stakeholders noted, saying that they were told what they “could not do” but not given tools to handle such things as tantrums when the foster parent has been told they cannot touch the child. Adoptive parents noted that they received no training on post-adoption needs and topics, including social security or medical information.

Additional particular areas of reflection and recommendation include:

- Licensing: Several stakeholders suggested that foster parents could follow up with people who have applied. Timely follow up is important, noted one stakeholder who did not receive a call back for two months after she contacted the office. Some stakeholders noted that the process takes a long time to complete. One foster parent started the process in October, finished classes in December, and received the license in May. Others felt that the process was easy and quick. Some stakeholders reported receiving inconsistent information. For example, one foster parent was initially told she could not foster while she was pregnant, then told she could only take children ages 8 and over, but then received calls for children under age 3.
- Retention feedback: In some stakeholders’ experience, CYFD did not do enough to retain them when they expressed a need to take a break. When asked if they could put their license on hold, they were told that was not possible. Others stated that the retention efforts depend on the caseworker. Some stakeholders were told that they must provide respite in order to maintain their license. One foster parent expressed continuing to do the work “because it is what I am supposed to be doing.” Another stakeholder described not being reimbursed for things, and not having clarity about what qualifies for reimbursement. Stakeholders expressed the need for communication, continuity, and stability. When case workers come into the home for a visit, it is important to make the reason clear. Stakeholders expressed a need for a helpline, and suggested that a volunteer coordinator could facilitate help from individuals who want to support children but are not able to foster or adopt.
- Cultural disproportionality: Stakeholders expressed the need for more Native American foster families, noting that there may be people who qualify who have native blood but don’t know the rules so more information is needed. Some people might believe they cannot afford to become foster parents, stakeholders noted, and might do it if they

understood it better. Case workers should discuss cultural needs, stakeholders said, and others noted that there are many resources available.

Working with Biological parents: Foster parents expressed an interest in case workers assisting in relationship building with biological parents when feasible, including how to navigate visitation. Noting that the relationship between biological and foster/adoptive parents sometimes takes a while to build, foster/adoptive parents noted the importance of letting the biological parent know they are not there to take their place. This topic should be included in training. Case workers need to understand that foster/adopted children will see other children in the foster/adoptive family, and should also see their biological siblings in other homes. It sometimes happens that relatives appear after years, and express interest in their relative child. Encouraging relative connections doesn't mean they have to live with them. Case workers should communicate with relatives about the status of their relatives in care.

Youth

Currently, PSD supports and is actively involved with Leaders Uniting Voices, Youth Advocates of New Mexico (LUVYANM), an organization of current foster care youth and foster care alumni. Members of LUVYANM plan the annual Independent Living Conference, developing the theme and program, planning workshops, and identifying speakers. Youth are also involved in planning and participating in the annual Children's Law Institute. PSD collaborates with LUVYANM to develop recommendations and strategies to improve outcomes for older children in care. Recently, the collaboration has focused on sibling rights, particularly in the areas of visitation and preserving connections post-adoption.

During the reporting period, PSD partnered with LUVYANM to conduct surveys and focus groups on a range of topics including how to help youth in foster care develop and maintain connections with siblings and natural supports, how to effectively work with youth on life skill development, how to conduct home visits effectively, and what PSD workers need to look for or ask in order to accurately assess if something is wrong.

In another example of how LUVYANM informs PSD planning, during the 2019 Children's Law Institute, LUVYANM youth coordinated a session entitled "LUV-YA (NM) for Changing." The purpose of this workshop was to describe the challenges and barriers youth have faced while in foster care and how they have overcome these barriers with the help of their supports and community partners. This workshop was composed of a youth panel with time for questions and answers as well as an activity. LUVYANM members told their stories and what key aspects made a large positive impact in their lives. The audience had the opportunity to hear real life stories of these youth, along with their highs/lows, obstacles, and achievements. Youth advocated for system change at this workshop by incorporating their personal stories to provide the audience with the opportunity to see from a youth perspective when looking into system change. Youth shared their journey in the foster care system as well as their transition to adulthood. They shared specific trials such as how some lacked the skills needed to be ready to transition into adulthood and having to find housing due to them no longer being able to remain with their

foster family which had a trickle effect that negatively affected their educational goals by preventing graduation due to the worry of housing and additional adult responsibilities. Lastly, the youth shared some constructive thoughts of how they could have been better supported in their life goals such as extending more services post-eighteen, having one caring adult to be there for them, additional resources, and being listen to and apart of the decision making processes. The hope is to for the audience to be more aware of the daily struggles youth are forced to face while in foster care and during their transition into adulthood and give helpful information to initiate the start of further system change to better support youth and their futures.

During the reporting period, PSD also partnered extensively with New Mexico Child Advocacy Network (NMCAN) to support planning and partner on a number of reform proposals considered in the legislature. This included partnering with NMCAN to improve and pass SB23, which extends foster care supports to age 21. CYFD and NMCAN are also collaborating to overhaul the department's training, practices, and policies related to serving LGBTQI youth. More broadly, CYFD works closely with NMCAN to revise key policies to make CYFD more youth-centered and responsive, and looks forward to structuring the collaboration around upcoming initiatives and priorities.

In 2020-2024, PSD will continue to work closely with the LUVYANM youth leaders to ensure that policy, program development, administration, and oversight are informed by youth perspectives, and that select youth-driven initiatives are implemented. PSD anticipates actively seeking input from LUVYANM in planning its implementation of new policies, including the extension of foster care, passed into law in April 2019 and to be implemented during the time frame of this CFSP. Future APSRs will detail collaboration with LUVYANM and other structures for facilitating youth input and participation.

CYFD will also continue to collaborate with NMCAN, a statewide youth engagement project to ensure that the department takes into account the experiences and wisdom of youth in developing and implementing policies. Additional information about the collaboration with NMCAN is provided in the Services Section below.

In the coming year, CYFD is committed to establishing an Office of Transition Age Youth and Youth Homelessness, which will include youth with lived experience as full-time, regular policy staff. The Office will be responsible for facilitating the department's direct engagement with transition age youth. Its first priority will be structuring and supporting the implementation of Extended Foster Care, as provided for by SB23, passed by the New Mexico State Legislature in March 2019.

Tribes and Pueblos

Currently, PSD works collaboratively with the 23 Tribes and Pueblos located in New Mexico, as well as with those tribes whose members come into the care of the agency. Collaboration is

provided for through a range of standing meetings and the formal structures led by the CYFD Native American Liaison.

Tribal input on the development of the 2020-24 CFSP was obtained through stakeholder meetings held in April and May 2019. Below is a list of tribal partners invited to the stakeholder meetings:

Tribe or Pueblo	Representative
Pueblo of Acoma	Governor Fred S. Vallo, Sr, Donalyn Sarracino, Sharon Young
Pueblo of Cochiti	Governor Joseph H. Suina
Pueblo of Isleta	Governor E. Paul Torres, Caroline Dartez
Pueblo of Jemez	Governor Joshua Madalena, Carla Sandia, Hennetta A. Gachupin
Pueblo of Laguna	Governor Richard B. Luarkie, Marie Alarid
Pueblo of Nambe	Governor Phillip A. Perez, Venus Mongofeds
Ohkay Owingeh	Governor Marcelino Aquino, Rodelle Thompson
Pueblo of Picuris	Governor Richard Mermojo
Pueblo of Pojoaque	Governor George Rivera
Pueblo of San Felipe	Governor Joseph E. Sandoval, Darlene J. Valencia
Pueblo of San Ildefonso	Governor Terry L. Aguilar, Sharon Serrano, Julie Sanchez
Pueblo of Sandia	Governor Stuart Paisano, Randall Berner, Kimberly Lorenzini
Pueblo of Santa Ana	Governor George M. Montoya, Nathan Tsosie
Pueblo of Santa Clara	Governor J. Michael Chavarria, Jacque Wright, Julie Bird, Terri Chavarria
Pueblo of Santo Domingo	Governor Oscar K. Lovato, Tori Garnat
Pueblo of Taos	Governor Clyde M. Romero, Ezra Bayles, Helena Concha
Pueblo of Tesuque	Governor Robert Mora, Sr., Jeannette Jagles
Pueblo of Zia	Governor David Pino, Victoria Herrera
Pueblo of Zuni	Governor Arlen P. Quetawki, Sr., Betty Nez, Marla Fastwolf
Jicarilla Apache Nation	President Ty Vicenti, Hilda Petago, Karen Keating, Susan Thompson, Rubesan Sandoval, Olivia Nelson, Violet Garcia
Mescalero Apache Tribe	President Danny Breuninger, Sr.
Navajo Nation	President Ben Shelly, Regina Yazzie, Irene Eldridge, Michele Jones
Navajo Nation Council	Johnny Naize
All Pueblo Council of Governors	Chairman Terry L. Aguilar (San Ildefonso Pueblo) and Secretary Vincent Toya, Sr. (Jemez Pueblo)
Five Sandoval Indian Pueblos	Director James Roger Madalena
Eight Northern Indian Pueblos Council	Executive Director Gil L. Vigil
Ramah Navajo	Vera Beaver, Loretta Martinez, Jemlisa Raplult
Southern Ute	Ann Hale

PSD conducted a Tribal Listening Session in April 2019 to better understand how well tribal communities are being engaged and consulted in the development of PSD policies and programs that may directly affect Native children and families. Some of the key learnings from that stakeholder listening session are as follows:

Whereas in the past CYFD delivered presentations to tribes, with no input from the tribes, communication, collaboration, and consultation have improved under the new tribal liaison, and the tribes appreciate being brought to the table where meaningful dialogue can take place. There is still inconsistency at the field level as some field level offices have been very proactive in

inviting the tribes to FCMs and meetings—which has prevented some children from coming into care and has also resulted in some children being placed with the tribe—while other field level offices have not been communicative with tribes. Tribal stakeholders say more of their tribal members will attend meetings with CYFD if leadership continues to build relationships and ask for their input.

There is a marked difference now with the state coming in to ask for tribal stakeholders' thoughts on practice, for example, rather than—as in the past—coming in to say how things would be done. While communication, collaboration, and relationship building have been received positively by tribal stakeholders, work remains to be done to ensure consistency in these areas among all tribes. Tribes in a couple of counties express their concerns about institutional racism and a lack of consultation about cases. Most tribal stakeholders express appreciation that CYFD has demonstrated that it wants to work with the tribes and is getting tribal stakeholder input before implementing something. Tribes express they are now feeling heard.

Tribal stakeholders note the need for more training on ICWA and working with tribal communities. The consortium is willing to help with these trainings—which should include Native American history—and can go to individual field offices to provide them. Another barrier is the view of some tribal stakeholders that the system is punitive and negative so the system itself is seen as a barrier. Data sharing is another barrier. Tribal stakeholders expressed interest in better access to data from the state. Tribes are not equipped themselves to collect data and do not have the resources to purchase or maintain a database. Data systems must be approved by the tribal council, and there is some concern about data collection, with stakeholders asking who will have access to the information. Some tribes need help educating elders and the council on contemporary practices such as data collection. Tribal stakeholders noted that the database does not need to be complex but rather should be simple, uniform, and specific to their pueblos. Tribes are open to collaborating with CYFD on a database system they could also use, and need assurance that the state is willing to partner with them to make that happen.

In 2020-24, PSD will continue to honor and build the relationships with the tribal and pueblo communities throughout NM. PSD will continue to hold stakeholder meetings to obtain ongoing feedback and assist in identifying strengths, challenges, and progress towards goals. PSD will share the CFSP with tribal partners through the Native American Liaison and tribal contacts – tribal governors or presidents. PSD will request a copy of each tribe or pueblo's CFSP through their governor or president and through the PSD Native American liaison.

The Federal Reporting Bureau Chief, Cynthia Chavers, is designated to be the Tribal Liaison. In this role, Ms. Chavers represents CYFD/PSD in several workgroups and consortiums, including the NM Tribal ICWA Consortium, the Tribal-State Judicial Consortium, and the NM Partners Group facilitated by Casey Family Programs. Ms. Chavers also serves as a consultant to field staff on ICWA cases and to the Professional Development Bureau on training needs of the agency.

Ms. Chavers is also responsible for the maintenance of any existing, and the creation of any new, Joint Powers Agreements or Intergovernmental Agreements between CYFD and the tribes. In

addition, the IV-E unit has designated one Eligibility Determination Specialist, Justin Hunter, to serve as the liaison to the tribes requiring IV-E reimbursement for foster families who have been licensed by the tribe or pueblo.

PSD will work with these groups to address general concerns of the tribes; to increase the communication and collaboration between the state child welfare agency and the tribes; to ensure that best practices are widely known and accepted by field staff; to consult on cases when tribes request assistance in working with PS field staff; to provide training, education, and resources to CYFD's tribal partners; and to continue to advocate for ICWA to be considered the "gold standard" in child welfare practice in NM.

PSD also continues to provide notification of any child welfare trainings to the tribes and pueblos through an email list serve. PSD offers basic training for all new tribal social services workers through the PSD Foundations of Practice training. PSD registers and arranges for all new tribal employees who wish to attend this training. In addition, PSD notifies the tribes and pueblos of the SAFE home study trainings that are coordinated by CYFD, and covers tuition cost when monies are available.

Feedback from Tribes Regarding Strengths and Gaps in Service

As noted above, stakeholder feedback was elicited from tribal communities to understand their experiences with PSD and how best to provide support to Native children and families. Respondents highlighted Practices that were currently working well, and they also raised points of concern. It was reported that communication, collaboration, and consultation have improved under the new tribal liaison, and the tribes appreciate being brought to the table where meaningful dialogue can take place. However, there is still inconsistency at the field level as some field level offices have been very proactive in inviting the tribes to FCMs and meetings—which has prevented some children from coming into care and has also resulted in some children being placed with the tribe—while other field level offices have not been communicative with tribes. Tribal stakeholders say more of their tribal members will attend meetings with CYFD if leadership continues to build relationships and ask for their input. There is a marked difference now with the state coming in to ask for tribal stakeholders' thoughts on practice, for example, rather than—as in the past—coming in to say how things would be done. While communication, collaboration, and relationship building have been received positively by tribal stakeholders, work remains to be done to ensure consistency in these areas among all tribes. Tribes in a couple of counties express their concerns about institutional racism and a lack of consultation about cases. Most tribal stakeholders express appreciation that CYFD has demonstrated that it wants to work with the tribes and is getting tribal stakeholder input before implementing something. Tribes express they are now feeling heard.

As reported above, tribal stakeholders note the need for more training on ICWA and working with tribal communities. The consortium is willing to help with these trainings—which should include Native American history—and can go to individual field offices to provide them. Another barrier is the view of some tribal stakeholders that the system is punitive and negative so the

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Schools

On December 6, 2012, the New Mexico Supreme Court ordered the establishment of a joint task force on education. The task force has submitted recommendations to the Governor, the Supreme Court Chief Justice, and the Secretaries of CYFD and the Public Education Department related to the challenges and barriers in addressing the educational needs of children and youth in the child welfare system. The task force targets specific educational outcomes for improvement, identifies and implements solutions, and has developed a cross training plan and implemented a data system shared between child welfare, education, and the judicial system.

PSD represents child welfare as a participant on the New Mexico State Advisory Panel – Individuals with Disabilities Education Act (IDEA) Part C.

PSD has worked with the Public Education Department and the Department of Health Office of School Health to develop and disseminate an e-learning for school personnel on detecting and reporting child abuse and neglect.

CYFD is also working closely with the New Mexico's Public Education Department, Human Services Department, and Department of Health to implement the settlement agreement in Yazzie/Martinez v. State of New Mexico, in which the court ordered the state to significantly improve educational programs and supports for all New Mexico children.

In 2020-2024, PSD will continue to collaborate with Foster Ed, the CCIC, and Albuquerque Public Schools on the implementation of the Every Student Succeeds Act (ESSA).

Other Partners

Currently, PSD maintains a number of additional essential collaborations, each of which informed the development of this 2020-24 CFSP:

- Since 2019, CYFD is actively partnering across state government agencies as one of the priorities of the new administration is a connected and collaborative public sector. This has included shared priorities with HSD and DOH in rebuilding the community based mental health services for children in New Mexico, collaborating with the department of

Aging on subsidized permanency and other supports for grandparents raising grandchildren, working closely with HSD to build a single data system for individuals on Medicaid and/or who need behavioral healthcare services, working with PED on implementation of the Yazzie settlement agreement, and working with the department on Indian Affairs on behavioral healthcare and data projects with tribes.

- In FY20 Behavioral Health Services (BHS) has participated in the monthly Comprehensive Addiction and Recovery Act (CARA) workgroup meetings. BHS funded the development of an Infant Mental Health Module targeting development, to be included in the CARA state trainings. A list of Child Parent Psychotherapy providers contracted by BHS was provided to the CARA Workgroup to be given to trainees for referral purposes. It is BHS understanding that this list would also be provided to maternity wards in hospitals.
- CYFD PSD continues to actively support the vision and efforts of the Multi-Disciplinary Teams (MDT) throughout the state through the Child Advocacy Center contracts the Prevention Unit manages. The contracts include a particular focus on the MDT Protocols as well as the coordination and facilitation of the MDT meetings in an effort to support a more comprehensive approach to the investigation of child abuse and neglect a more integrated system. The Prevention Unit has begun conducting site visits and has included interviews with MDT members in order to gather qualitative data and will utilize the information gathered to support the MDTs that are working well to continue to perform well and to support those that are needing improvement.
- CYFD PSD issued contracts to community based agencies throughout the state to provide Community Based Prevention, Intervention, and Reunification (CBPIR) Services to children, youth and their families. These contracts include PSSF and CBCAP and are managed by the Prevention Unit. As part of the collaboration, peer support and continuous quality improvement process, the Prevention Unit meets with the CBPIR providers regularly. The May 2020 Peer to Peer call was held utilizing a video meeting platform partially due to the COVID-19 related State of Public Health Emergency order issued by Governor Michelle Lujan Grisham but also in an effort to support the ability for the providers to participate in the meeting as they are located throughout the state. The meeting format worked well and will likely become a more frequently used method for meeting beyond the circumstances related to COVID-19 State of Public Health Emergency order.
- The Domestic Violence Unit Manager continues to hold stakeholder meetings with contracted Domestic Violence agencies as part of the Unit's site visit schedule. The meetings are held at the PSD county offices and include the county office manager and staff, and other relevant services providers. Discussion includes improvement in working relationships, improved communication and information sharing, gaps in services, cross training opportunities, and discussion about the warm hand-off strategy that PSD is implementing as part of the Program Improvement Plan.

- Foster and Adoptions Bureau (FAB) continues to strengthen the relationship between Licensing and Certification Authority (LCA). FAB and LCA continue to facilitate quarterly meetings with the Child Placement Agencies to continue the support and expectations of ESSA, reasonable and prudent parent standards, training, and ongoing efforts to maintain sibling placements and relative connections Throughout 2019, the Foster and Adoptions Bureau offered technical assistance to private adoption agencies, treatment foster care providers, and community homes ensuring each agency follows New Mexico Child Placement Agency Regulations. During this Covid-19 epidemic LCA and FAB have been holding weekly meeting with the various agencies to ensure that they are up to date with the current requirements, as well as offering additional technical assistance.

CPA and LCA have established a Mission Statement and plan to continue strengthening collaborative work and improve regulatory compliance of Treatment Foster Care agencies. CPA and LCA hold weekly conference calls with TFC providers to support them through the COVID-19 pandemic emergency.

- A Foster and Adoptions Bureau representative continues to meet with the Adoption and Foster Care Alliance of New Mexico. This membership allows the representatives of the Alliance and FAB to discuss regulations and any new guidelines that may affect the field of adoptions in New Mexico. The collaboration is expected to continue.
- The Foster and Adoptions Bureau continues to work with Pegasus, New Mexico Voices for Children, Aging and Long Term Services, and the NM Human Services Department in continuation of the task force to address issues grandparents in New Mexico face in raising grandchildren. The task force provided recommendations to the New Mexico Legislative Finance Committee (LFC) and the Legislative Health and Human Services Committee (LHHSC). The New Mexico House and Senate reauthorized the task force through a joint memorial to continue working on issues faced by grandparents raising grandchildren through 2019. The task force continues to meet monthly and the work is ongoing.
- A team from New Mexico attended the CBCAP Grantee meeting in Washington, DC and worked together on a plan to share with Judges the various contracts that are available through Children's Youth and Families Department (CYFD) can serve the families and youth both the Courts and CYFD serve. It was enlightening to the Judges that there were community providers throughout the State of New Mexico that they can request the family and/or youth can be referred for services.
- The roll out of the new licensing policies for fictive kin and the state funded Kinship Guardianship as well as legal services and hotline for kin. The department continues to revise our practice to support more kinship guardians for our youth in the coming year.
- Community collaboration will play a prominent role in developing programming around the Family First Prevention Services Act (FFPSA). Currently, the PSD is involved in planning

meetings with CYFD’s Behavioral Health Division, Health and Human Services, and the Department of Health to begin mapping out the implementation of new statewide programming that aligns with FFPSA.

In 2020-2024, PSD will continue the collaborative efforts detailed above, and will detail additional emerging collaborations in future APSRs.

Public Input

Currently, the Office of the Secretary and PSD each maintain a constituency liaison who address public concerns regarding the division or department. In addition, CYFD maintains a website, www.cyfd.org, which provides information about CYFD and its programs.

Also, as required by state regulation, a public hearing is held any time PSD proposes new policy for promulgation or for feedback on the Social Security Block Grant (SSBG) Title XX plan. The NM Citizen Review Board Project publishes an annual report which provides recommendations for systemic changes in the child welfare system. The PSD director’s response to the Annual Report is included as an attachment to the CAPTA Plan.

In 2020-2024, PSD will continue to maintain a Constituency Liaison who addresses constituent concerns via telephone, letters, and referrals from the Protective Services Director’s Office, Office of the Secretary, and Office of the Governor. The liaison is primarily responsible for ensuring that complaints and concerns are addressed by PSD in a timely manner. The majority of concerns received continue to come from birth parents, related to the PSD worker not returning their phone calls in a timely manner, not communicating clearly the steps the parent needs to take to reunify with their child, and difficulties a parent has with visitations. The second most common concern is from relatives, who are not being considered as a placement resource for their grandchild, nieces/nephew in state custody. PSD continues to believe that if birth parents are assessed and engaged appropriately and relatives or fictive kin receive information and communication regarding CYFD/PSD policies and procedures, constituent concerns will decrease. This year we have had a significant increase in calls from foster parents as well. The calls range from issues with payments, to communication issues with the department, placement issues, to not feeling like they are a valued part of the team, etc.

Between June 1, 2019, and May 31, 2020, PSD received a total of 985 constituent concerns. This was a decrease from the previous year.

New Mexico Substitute Care Advisory Council

The Substitute Care Advisory Council (hereinafter “Council”) was created in FY 17 under Chapter 32 [32], Article 8 NMSA 1978, and (hereinafter Act”). The purpose of the Act is to “establish a permanent system for independent and objective monitoring of children placed in the custody of the department (Children, Youth & Families Department, hereinafter “CYFD”)”¹. The Act

¹ NMSA 1978, Section 32A-8-1 et seq., Citizen Substitute Care Act; 32-8-4A.

establishes a nine-member Council² who is authorized to hire staff to oversee the functions and procedures of the substitute care review boards (hereinafter “SCRB”). The Council is administratively attached to the Regulation & Licensing Department (hereinafter “RLD”) according to the provisions of Section 9-1-7 NMSA 1978³, with funding of the Council comprised of a combination of State General Funds and an interagency transfer of funds from CYFD. The Council functions under NMAC 8.26.7.

The Act meets the requirement of the federal Child Abuse Prevention & Treatment Act⁴ (hereinafter “CAPTA”), which requires states to establish volunteer citizen panels⁵ to:

- Examine policies, procedures, and practices of State and local agencies and where appropriate, specific cases to evaluate the extent that state and local child protection systems are:
 - effectively discharging their child protection responsibilities, and [are]
 - in compliance with the CAPTA state plan, child protection standards and “any other criteria the panel considers important to ensure the protection of children”.
- Provide “public outreach to assess the impact of current procedures and practices upon children and families in the community”.

CAPTA requires the state agency (CYFD) to:

- Provide volunteer citizen panels with access to information on cases to be reviewed.
- Within 6 months of the date of the annual report, “submit a written response to State and local child protection systems and the [Council] that describes whether or how the State will incorporate the recommendations to make measurable progress in improving the State and local child protection system”.

Both CAPTA and the Act require review panels/boards to be composed of members’ representative of the community they serve, including “members who have expertise in the prevention and treatment of child abuse and neglect, [which] may include adult former victims of child abuse or neglect”⁶. Further, both the Act and CAPTA require an annual report which includes recommendations for improvement to the child protection response system. CAPTA requires a written response to the annual report by CYFD within 6 months of receiving the annual report; the Act does not require a written response.

In FY 19, the Council noted that although CAPTA requires a timely written response which must include a description ‘whether or how’ CYFD ‘will incorporate the recommendations to make

² The nine-member Council is comprised of the Cabinet Secretary (or their designee) of the Department of Finance and Administration, Department of Health, Department of Human Services and the Public Education Department. The other five members are appointed by the Governor: two public members with expertise in child welfare, two public members between the ages of 18 and 30 who have been in substitute care, and a children’s court judge.

³ The Council shall function independent of RLD and without approval or control of RLD, submit budget requests and any reports required by law or the Governor through RLD, and if mutually agreed, RLD may provide budgeting and other related clerical and administrative support to the Council; RLD shall include Council budget requests, without changes in the RLD budget..

⁴ CAPTA, Section 106.c. Citizen Review Panels.

⁵ In New Mexico, volunteers are referred to as Members. Citizens interested in becoming a Member undergo an application process which includes background and reference checks, interviews, observations, training and the acknowledgement and adherence to confidentiality agreements and the Member Code of Conduct.

⁶ NMSA 1978, Section 32A-8-1 et seq., Citizen Substitute Care Act; 32A-8-5D. CAPTA 106.c.2 Citizen Review Panels Membership.

measurable progress in improving the state and local child protection system⁷, CYFD did not provide such a response to the annual reports of FY 17 and FY 18. Further, the Council noted in FY 19 the need to identify changes in the Act to enhance the functioning of the Council and to collaborate with CYFD to create a Joint Powers Agreement that supports how the work of the Council will inform CYFD to result in systemic change.

Pursuant to the Act and CAPTA, the Council is authorized to conduct case reviews as needed to fulfill the purpose of the Act and CAPTA. The Council oversees case reviews which are conducted through SCRB meetings. Each SCRB is comprised of trained Members and each meeting is facilitated by Council staff. The Council has adopted a case review framework which has demonstrated reliability in evaluating CYFD's effectiveness on an individualized basis. However, while this framework includes many of the components of a certified case review model, the framework itself is not certified. The Council has identified the *Quality Services Review* model (hereinafter "QSR"), which is a nationally recognized case-based review process which examines delivery of services, adherence to practice expectations, provides a framework for talking about practice, and creates opportunities for shared problem solving. QSR has been adopted as part of class action settlement cases in various states and is a process which is sustained after exiting a class action to provide assurance of an ongoing trusted monitoring of a child protection system.⁸ The Protective Services Division of CYFD follows the Child & Family Services Review (hereinafter "CFSR") process which is required by federal law. According to the Center for Study of Social Policy, "*the rigorous QSR process is an integral part of continuous quality improvement efforts and should be used to inform system practice changes*" and the data from both CFSR and QSR should be '*available and accessible*'.⁹ It is the intent of the Council for staff to obtain certification in QSR by FY 21.

When the Council conducts a case review, the Act requires submission of a report to the Court following the review. This report includes a summary of the case, noted strengths, concerns and recommendations and is sent to the presiding judge and all known Interested Parties to the case. During FY 19, cases of children and youth were reviewed in each of CYFD's 5 Regions and in each of the thirteen Judicial Districts resulting in 97 children and youth reviewed. The Council's case selection criteria included a focus on youth 13.5 – 18 years of age. It is well known that youth in substitute care, specifically those who 'age out' of substitute care have worse outcomes than their non-substitute care counterparts. Youth who age out of substitute care have lower rates of post-secondary educational attainment, employment and higher rates of homelessness and criminal justice involvement. As such, attention has been drawn nationally to improve child protection response systems to meet the needs of youth and to prepare youth to transition to adulthood.¹⁰ Of the 97 children and youth reviewed, 53% were between the ages of 13.5 and 18. CYFD has specific policy and procedures related to providing services to youth.¹¹ Youth services are intended to assist all youth aged 14 and older in CYFD custody, due to abuse and neglect (regardless of placement, permanency plan, runaway status or disability), to successfully

⁷ CAPTA 106 c.6 Citizen Review Panels, Reports.

⁸ *Quality Service Reviews A Mechanism for Case-Level Advocacy and System Reform*, Center for the Study of Social Policy, <https://cssp.org/wp-content/uploads/2019/03/QSR-Advocacy-System-Reform.pdf>.

⁹ *Quality Service Reviews A Mechanism for Case-Level Advocacy and System Reform*, Center for the Study of Social Policy, <https://cssp.org/wp-content/uploads/2019/03/QSR-Advocacy-System-Reform.pdf>.

¹⁰ Jim Casey Youth Opportunities Initiative; <https://www.aecf.org>.

¹¹ CYFD Youth Services 8.10.9 NMAC Policy and Procedures.

transition into adult living, promote self-sufficiency, positive youth development, relationships with mentors and other supportive adults and the safety, permanency and well-being of the youth.¹² Youth Services are also available for youth who have turned 18 and youth who were adopted from state custody after the age of 16. For the purposes of the Council, youth reviewed were still in the care of CYFD and not yet 18 years of age.

According to information provided to the Council, there were 461 youth aged 13.5-18 at the end of FY 18¹³. The Council reviewed 11% of these youth and examined youth services policies and procedures and assessed the effectiveness of their implementation.

In addition to the same concerns noted in the FY 18 annual report of case management, placement instability and maltreatment while in substitute care, the FY 19 case reviews specific to youth aged 14 and older found that the youth services policies and procedures were not implemented according to CYFD Policy and Procedure. For example, of the youth reviewed, youth did not have evidence of Independent Living Assessments being completed according to procedure, or an updated case plan with a clear component of a Life Skills Plan established in accordance with procedures. Of particular note was the lack of youth involvement in these processes, a disconnect between CYFD workers with responsibilities for delivery of Youth Services and a lack of understanding by CYFD workers and Youth Attorneys that youth services to prepare a youth to successful transition to adulthood is required for all youth regardless of permanency plan or placement. As these assessments are the foundation of the Youth Services Program, when these are not completed, other services which may be provided are not in accordance with CYFD Policy & Procedures or best practices for youth in the care of CYFD. The Council expressed concern that the success of the NM Fostering Connections Act (SB 23)¹⁴, also known as *Foster Care to 21*, is in jeopardy without the solid foundation of CYFD engaging and providing services to youth prior to age 18 and the Courts ensuring the CYFD Youth Services Policies and Procedures are being followed.

The Council's Program Director is a member of the New Mexico Children's Court Improvement Commission (CCIC), the Protective Services Committee of the CCIC, the New Mexico Child Fatality Review Board, the New Mexico Children's Law Institute Planning Committee and the National Citizen Review Advisory Panel. In FY 19, the Council hosted the annual national conference for citizen review panels in Albuquerque, NM in June 2019.

- *"Rising to Meet the Challenge: Improving Child Welfare Response Systems"*, the theme of the 2019 National Citizen Review Panel Conference, brought together speakers, presenters and attendees from across the nation for engaging and informative discussions on best practices and system improvements. With 165 registrants representing 28 states including Washington DC., it was the most well attended conference in its history. CYFD supported the conference through a workshop co-presented by the CYFD Secretary and providing funding for 14 CYFD protective services

¹² CYFD Youth Services 8.10.9.8.; 8.10.9.9.

¹³ CYFD provides a monthly list to the Council of children and youth who have been adjudicated and in their custody; this information is from the list dated 6-30-2018.

¹⁴ New Mexico Senate Bill 23, "Fostering Connections Act", Chapter 149 April 2, 2019.

staff to attend. For more information on the conference visit the Council's website at <http://www.scacnm.org/2019nationalcrpconference/>.

Courts and Children's Court Improvement Commission

Currently, PSD serves on the State's Children's Court Improvement Commission (CCIC) and many of its work groups, including the advisory groups for the CCIC training and data grants and new work groups on parent representation, education, and quality of representation and hearings. PSD initiatives that involve the court and court processes are discussed at CCIC meetings, and CCIC regularly seeks PSD's input on its own initiatives.

CCIC holds a training grant that is implemented by the Children's Law Center at the University Of New Mexico School Of Law and the New Mexico Administrative Office of the Courts (AOC). PSD, CLC, and AOC work together to design a Title IV-E-funded training program for judges, attorneys, Court Appointed Special Advocate (CASA) volunteers, and court staff. Training topics include maltreatment, trauma, and the social and emotional well-being of children who have been abused or neglected. PSD is represented on the CLC Advisory Committee.

PSD representatives also participate on the Children's Justice Act Advisory Group (CJAAG), which ensures coordination of the expenditure of Children's Justice Act funds to support the investigation and prosecution of child abuse, as well as services intended to mitigate the trauma to the child victim. Other CJAAG members include judges, attorneys, law enforcement, service providers, and advocates.

New Mexico's Senior Supreme Court Justice has created a Children's Court Judges Association (CCJA) to connect judges from around the state to work through issues unique to our children's courts. The CYFD Cabinet Secretary has made himself available to the CCJA to provide information and answer questions about the policies, procedures, and vision of CYFD. In addition, CYFD's Director of Behavioral Health Services presented to the CCJA at the Children's Law Institute in January 2020 addressing the Psychotropic Improvement Initiative for children in CYFD custody, as well as bringing youth to speak to the judges about their own lived experiences within the residential treatment system.

There are several PSD representatives, including a PPW Supervisor, Chief Children's Court Attorney, and Family First Prevention Services Coordinator who serve on the Family Representation Task Force (FRTF). The FRTF was formed through a Senate Joint Memorial to study, develop, and implement a new model of family representation throughout New Mexico. The task force has researched best practices from across the country to help New Mexico better achieve its public policy of reunifying families when and as soon as possible. The FRTF has been directed to consider possible changes in law and whether the state should establish a separate agency or office with a primary mission of providing legal representation to children and parents in child protection cases. The FRTF is also to consider an inter-disciplinary approach to child protection cases in which a team – such as an attorney, social worker and parent mentor – work to strengthen the parents' ability to care for their children and shorten children's time out of

their family home without permanency, including addressing substance abuse disorders and other issues that may have led to the children coming into foster care.

In 2021-24, PSD will continue to actively participate in CCIC. PSD is providing both data and qualitative information to the Court Improvement Project (CIP) for the project's updated strategic plan submitted in July 2018. PSD and the CIP have been partnering to collect and analyze the data related to delays to permanency, including evaluation of outcome data collected by CYFD, quality assurance case review data, and court data. In addition, the committee has collected information from stakeholders through focus groups around the state and surveys. The CIP and PSD have worked to develop a procedure for potential guardians in abuse and neglect matters to receive counsel, considering what case event should trigger the right to counsel and producing guidance for judges on the scope of the representation and legal rights of potential guardians. The CIP is also working with PSD to identify and pilot promising practice initiatives. PSD will continue to partner with the CIP to provide mandatory training for new judges and attorneys working in the child welfare system.

PSD is also partnering with the New Mexico Family Advocacy Program (NMFAP). The NMFAP model is based on The Center for Family Representation in New York and the New Mexico Family Support Services pilot program initiated in Sandoval and Valencia counties, and provides parents with open child welfare cases an interdisciplinary team designed to improve parent and youth engagement, particularly with PSD case workers, foster parents, and service providers. The team consists of an attorney, a licensed master social worker, and a peer mentor, all specially trained in the NMFAP model.

The goals of NMFAP are to:

- Strengthen partnerships between state, tribal, and county, and community partners
- Effectively engage children, youth, and families;
- Focus concurrent planning on the achievement of timely permanency for children;
- Appropriately assess and mitigate safety and risk factors in families; provide timely and individualized services, resources, and supports for children in foster care and their parents; and
- Strengthen parents' capacity to protect and provide for their children.

NMFAP currently serves Valencia, Sandoval, and Bernalillo Counties. After a significant planning period, NMFAP was approved to begin implementation on February 1, 2020. NMFAP currently contracts with sixteen attorneys/law firms to represent parents under the NMFAP model, nine licensed master social workers, three parent mentors, and a clinical social worker. The NMFAP plans to expand to McKinley and San Juan Counties during Fall 2020 and test its efficacy across different subpopulations: urban/suburban/rural and Hispanic/American Indian. Respondent

attorneys in McKinley and San Juan Counties currently serve on the NMFAP Practitioners Committee.

NMFAP has been providing practitioners with training on a bi-weekly basis using both didactic and group processing models. The didactic training sessions are open to community peers and stakeholders.

NMFAP works closely with the Children's Bureau and Strengthening Child Welfare System to plan, implement, collect data, and evaluate the progress of the program.

The National Center for State Courts has been contracted as the evaluator of the NMFAP. NMFAP has utilized The University of New Mexico's Project ECHO to training modules for attorneys, social workers and peer mentors, as well as other system partners such as judges and PSD workers.

CYFD PSD continues to actively participate in CCIC by serving on the CCIC Leadership Team, workgroups and advisory groups. CCIC and PSD continue to partner in data collection and data sharing efforts related to the timeliness of permanency of children in care as well as partner on piloting promising practice initiatives for improving the timeliness to permanency. PSD specifically continues to partner on the expansion of the Family Support Services (FSS) Program and expanded into Bernalillo County, New Mexico's largest and diverse county. Families who have participated in the program as well as the professional members of the FSS Program's multi-disciplinary team continue to report positive outcomes for families as a result of the program. The qualitative data collected highlight that the benefits of the program are not solely experienced by the birth parents and their attorneys but by the children, Guardians ad Litem and the PS staff working with the family and the Children's Court Attorneys. In addition, one of the primary factors identified by families who have been served through the FSS Program or have had the opportunity to work with the program is the advocacy and support provided by the FSS social worker. Some of the advocacy and support efforts and activities cited include helping the birth parent communicate with their attorney and services providers as well as assist with transportation, accessing treatment services, and applying for SSI benefits and housing.

In January 2020, New Mexico began its first ever Indian Child Welfare Act (ICWA) court, becoming the sixth ICWA court in the nation. The ICWA court serves Native American children and families in the Second Judicial District's Children's Court. The creation of the court was announced on October 14, 2019, Indigenous People's Day. The creation of the court was a joint effort by the judiciary, CYFD, invested community stakeholders, and tribal leaders. The ICWA court currently serves approximately 70 families and over 100 children in New Mexico. To support the ICWA Court, PDS created an internal, all-Native female ICWA team of four ICWA caseworkers, an ICWA supervisor and two children's court attorneys. The CYFD ICWA Permanency Planning team, attorneys, judge, and Special Master involved in the ICWA Court have received specialized training to best serve and address the issues impacting New Mexico's Native populations.

Service Coordination

Community-Based Child Abuse Prevention

With federal CBCAP and state general funds, PSD provides community-based prevention and support services through a combination of contracted and direct services. In keeping with federal directions, PSD's approach to CBCAP planning, programming, and monitoring emphasizes:

- greater use of evidence-based or evidence-informed programs and projects;
- efforts to enhance parental capacity and parental involvement in CBCAP program development;
- better integration with child welfare services (as a front-end component of the continuum of services),
- services for underserved populations, and
- more effective use of leveraging funds to support prevention activities.

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

The CBCAP funds continue to be used to provide training to CBCAP and domestic violence funded service providers, child prevention awareness campaign efforts through PullTogether and family support services. CYFD specifically utilizes CBCAP funds to provide evidence-based family support programs for families with children 0-5 utilizing evidence-based and evidence-informed parent education curriculum. These programs use the CBCAP Conceptual Framework as the logic model for providing services. The main purposes of the CBCAP programs are:

- To support community-based efforts to develop, operate, expand, enhance and where appropriate to network initiatives aimed at the prevention of child abuse and neglect;
- To support networks of coordinated resources and activities to better strengthen and support families to reduce the likelihood of child abuse/neglect; and
- To foster understanding, appreciation and knowledge of diverse populations in order to effectively prevent and treat child abuse and neglect.

CYFD PSD issued contracts to community based agencies throughout the state to provide Community Based Prevention, Intervention, and Reunification (CBPIR) Services to children, youth and their families. The CBPIR contracts include both CBCAP and PSSF funding which allows for a continuum of care program design that in turn allows for an increase in the provision of child abuse and neglect prevention services, supports and activities. The CBPIR contracts currently serve 25 of the state's 33 counties and the expanded program eligibility criteria includes birth parents, relative and fictive kin caregivers, families pursuing guardianship or adoption, and foster parents. As a result, many more families have access to both primary and secondary child abuse and neglect prevention services and supports. In addition, by designing the CBPIR contracts to include individual Prevention, Intervention and Reunification services with all three services driven by a tiered case management model, families can self-refer to a CBPIR provider in their area and the provider is able to determine the service type and level of case management that best serves the family following the intake and assessment process. Furthermore, if or when family circumstances change, the CBPIR provider is able to make appropriate changes and adjustments to the type of service the family needs.

Each CBPIR provider is expected to complete a thorough and comprehensive assessment of the family's strengths and needs as well as their connections to resources and supports. The assessment guides the provider's decision about the appropriate tier level for the family to ensure they receive the necessary level of service provision. Such an approach allows for the family to progress in a manner that takes into consideration their strengths, areas of need and their connections to both formal and informal resources and supports. It also allows the provider the necessary flexibility to support the family's efforts to engage in services and successfully meet their goals. As a result, families are able to increase their caregiving capacity and the likelihood of child maltreatment decreases.

In lieu of a single statewide Child Abuse Awareness campaign, CYFD PSD requires every CBCAP contractor to partner with their local PS County Office to develop, coordinate and implement an awareness activity or event during Child Abuse Prevention month. Since each community is unique, this contractual requirement gives each contractor the flexibility to develop an activity or event that will be most effective in educating their community and increasing awareness about child abuse and neglect and the effects child maltreatment has on the individual, family and community levels. At minimum, each contractor must ensure that their activity or event meets the following requirements: 1) is available to the community at large; 2) increases community members' knowledge as to the effects of child maltreatment on children, families, and the community; and 3) promotes healthy parenting and positive family interactions. The types of events and activities may include, but are not limited to: media campaigns, educational presentations, participating in community-wide events and public awareness campaigns. CYFD PSD encourages the CBCAP contractors to be creative and include community members in the planning of these events.

CYFD PSD recognizes the important role that the CBPIR contracts have in child maltreatment prevention and as a result, plans to expand the contracts with the intent to have CBPIR contracts in all 33 counties.

Children's Justice Act

The Children's Justice Act Advisory Group (CJAAG) continues to receive administrative support from the CYFD PSD Prevention Unit. The projects that were funded by CJAAG in 2019 included: the annual Children's Law Institute Conference; specialized training to forensic interviewer programs in the state; mentoring and training of prosecutors and expert witnesses involved in child abuse and neglect cases; and training on human and sex trafficking identification, intervention and advocacy. The 2020 annual retreat was held in April 2020 via video meeting platform due to the COVID-19 related State of Public Health Emergency order issued by Governor Michelle Lujan Grisham; the CJAAG members successfully reviewed the applications for funding and made their funding selections. The projects that CJAAG selected for funding include: the annual Children's Law Institute Conference; the placement and training of a court house dog; the Southeast Crimes Against Children Conference; mentoring and training of prosecutors and expert witnesses involved in the prosecution of child sexual abuse cases; training for Isleta Pueblo first responders to child abuse and neglect cases; training for law enforcement, advocates, medical and legal professionals in McKinley County who are involved in the response to child abuse and neglect; training costs for MDT members to attend the annual Crimes Against Children Conference; and trainings on the medical forensic response to child sexual abuse cases including ways for reducing additional trauma. The projects selected for funding in 2019 and 2020 by CJAAG continue to support the goals of CYFD for improving outcomes for the children, youth and families of New Mexico and are in alignment with the objectives of the Children's Justice Act.

Court Improvement Project

In The 27th Annual Children's Law Institute Conference was held January 8-10, 2020 in Albuquerque. The theme of the 2020 conference was: "Walking the Talk: Prevention, Support, and Radical Acceptance" and focused on the recent changes in New Mexico regarding child welfare, juvenile justice and the judicial systems which emphasize prevention, support and radical acceptance. Though safety continues to remain an important and critical aspect of the work, New Mexico also recognizes and is challenging these systems to address the concerns and needs related to children and their families by engaging and supporting the existing connections within families and within their local communities.

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As was the case in 2019, over 1,000 individuals attended the 2020 CLI. Participants included

CYFD staff, foster parents, adoptive parents, youth, Children's Court Attorneys, Court Appointed Special Advocates, Guardians ad Litem, Youth Attorneys, Judges, Law Enforcement, medical professions, counselors, therapists, social workers and educators. Two separate Pre-Conference Session opportunities were offered. Laura van Dernoot Lipsky's session, *Transforming Trauma- How to do this Work and Sustain*, focused on the importance of professionals sustaining their own personal wellbeing as well as the wellbeing of those they serve by raising awareness and responding to the cumulative toll being exposed to the suffering and trauma of others has on those working in the fields of child welfare and juvenile justice. Attorneys had the opportunity to attend Betsy Fordyce's, pre-conference session National Association of Counsel for Children (NACC) Red Book Training: The Context of Child Welfare Law and Legal Framework Part I. The training is designed to provide a comprehensive overview of child welfare law and practice and supports the NACC's mission to strengthen the delivery of legal services to children, youth, and families and to ensure high-quality legal representation. In addition, the training assists attorneys in preparing for the Child Welfare Law Specialist (CWLS) certification exam.

Attendees also had the opportunity to hear from Dr. Jaiya John, the Opening Keynote Speaker in his presentation titled: *Honoring the Medicine Wheel: Courageous Change and the Sacred Web of Life*. Dr. John spoke about the need for child welfare systems to move away from the typical bureaucratic process of doing the work towards embracing the human experience by building a system on the values of self-care and mutual care. In her Closing Keynote, Dr. Amelia Franck Meyer spoke about her work which is focused on public child welfare agencies serving as primary prevention agencies using an approach where children are kept safe with their families rather than from their families. In addition to the keynote presentations, attendees were able to select from 44 unique workshops focused on topics related to child abuse and neglect such as Creating Protective Communities for Youth; Kinship Care in New Mexico: Honoring Family Connections; The Family First Act: A Step Toward Justice; and Plans of Care as Prevention of Intergenerational Trauma: Prevention of ACEs, Initiation of System Support, and Acceptance for Mothers with Substance Use Disorder.

Dr. Andrew Hsi, Co-Chair of the CARA workgroup and head of the University of New Mexico's Institute for Resilience, Health, and Justice was another key featured speaker addressing plans of care as prevention of intergenerational trauma: prevention of ACEs, initiation of system support, and acceptance for mothers with substance use disorder. There were multiple panels speaking on lived experiences through the foster care system by both parents and youth. There were also specific workshop sessions that focused on advocating for trauma-informed services for children and families. The training of individuals within the court system directly falls in line with the Children's Court Improvement Commission and provides information on identified areas of maltreatment, trauma and social and emotional well-being of children who have been abused or neglected. Protective Services has representation on and ensures coordination of the State's Children's Court Improvement Commission (CCIC).

Developmental Disabilities

For all foster children who are 17 years or older that are applying for a DD waiver, Protective Services works with Department of Health to ensure they have resources and services in place prior to turning 18. If they have not, Protective Services requests expedited waivers to help them be successful upon aging out.

Service Coordination with CYFD Behavioral Health Services

Behavioral Health Services (BHS) Core Function

CYFD BHS is the behavioral health authority for all children in New Mexico. BHS, in collaboration with PSD, JJS and ECS, is committed to the provision of quality behavioral health services and supports that are trauma informed, evidence-based, culturally competent, and youth and family driven that meet the needs of CYFD's children, youth and families.

Who BHS Services

BHS provides behavioral health programs and services for children, youth and their families along with behavioral health-related training for CYFD's workforce in the JJS, PSD, and ECS divisions and community stakeholders serving this population.

BHS's Areas of Responsibility

- Oversight of community-based behavioral health services
- Community-based service development
- Domestic Violence Services and supports
- Support to JJS, PSD and ECS
- Licensing and Certification Authority (LCA) activities
- Community Behavioral Health Clinicians (CBHCs) serving target population of children and youth in JJS and PSD
- Supportive housing and emergency shelters
- Targeted trainings to PS and JJS staff and community stakeholders

Number of People Serviced in FY20

- As of SFY/20 Q3, approximately 7,150 clients were provided behavioral health-related services through the programs funded by CYFD BHS.

- As of SFY/20 Q3, approximately 1,150 CYFD staff, providers, or community partners have attended at least one of the many training programs and sessions provided by BHS contractors and personnel.

Key Challenges

Addressing the deinstitutionalization of New Mexico's children and youth through the use of trauma-responsive social and emotional therapies and supports.

Specific BHS Service Coordination Efforts with PSD

- *Community Behavioral Health Clinicians (CBHC's)*: CBHC's consult, assess clinical needs, assist with coordination and collaboration, team and advocate internally and externally for the target population of children and youth in PSD and JJS. CBHC's also conduct oversight on youth placed in congregate care settings in state and out of state. These include: JJS/PS crossover youth and all JJS youth involved on formal or informal conditions. CBHC's are also moving into providing oversight for out of state youth placed in RTC's in PSD custody. CBHC's act as a support to youth and families involved with CYFD to assure behavioral health needs are being addressed appropriately. In addition, they administer the Child and Adolescent Needs and Strengths (CANS) for JJS and Crossover youth. The CANS is a multi-purpose information integration tool that is designed to be the output of an assessment process. The purpose of the CANS is to accurately represent the shared vision of the child/youth serving system, child/youth and families. The CBHC's will also start to incorporate the use of the Crisis Assessment Tool (CAT) to identify if a youth or child has immediate behavioral health needs or not. This tool will assist the PSD workers when a youth/child comes into custody with behavioral health services being put into place at the beginning of involvement.
- *Coordinate Care Reviews*: CYFD BHS started to engage in Coordinated Care Review meetings to address youth who are currently placed in an RTC outside of NM. The following team members are invited to the care review meetings:
 - Managed Care Coordinators and physicians
 - PS Staff, specifically Permanency Workers, Placement Workers, Supervisors, County Office Managers and Regional Managers
 - RTC therapist
 - CBHC or their supervisor along with the Deputy Director
 - Any other pertinent team member identified
- *Addressing Youth Homelessness*: CYFD BHS, PSD and JJS are implementing a plan to address youth homelessness: Without stable/secure housing, other efforts to increase overall quality of life are generally ineffective-housing is a priority resource during a youth's transition to adulthood. CYFD will begin a larger effort to track and evaluate data

related to youth over the age of 18, in order to identify gaps in services and priority populations. Efforts to fill gaps in services that lead to homelessness include:

- Extended Foster Care;
- Partnering with community resources to connect transition age youth with housing resources; and
- Developing new and innovative resources to increase transition age youth housing opportunities.

CYFD and shelter workgroup members identify youth with lengthy crisis shelter placements. Contractual obligations for shelters include ensuring that if an appropriate level of care is available within a program; a shelter youth receives priority placement within that level of care, rather than remaining in a shelter. CYFD CBHC's are developing a coordination protocol with each shelter to ensure that discharge plans are developed early in a youth's shelter stay to reach a more stable placement quickly and efficiently. The CSE-IT Tool is being implemented to identify human trafficking victims entering shelter care, to include training on working with trafficking victims.

- *Health Transitions Expansion Program (HTEP) Grant:* BHS received a four year HTEP grant to serve transition age youth 16-25 with SMI/SED in Bernalillo and San Juan counties. As part of this grant, in collaboration with BHSD, BHS will develop and implement Youth Peer Support Services. Under the grant, transition age youth will be able to access Youth Support Services, build and be a part of Youth MOVE NM and Wraparound for Transition Age Youth. PSD and JJS youth will be able to access services under this grant.
- *Wraparound in NM:* "Wraparound is an intensive holistic method of engaging with individuals with complex need so that they can live in their homes and communities and realize their hopes and dreams." (From the National Wraparound Institute). Wraparound is in eight (8) sites Guidance Center (Lea County), Mental Health Resources (Roosevelt County), New Day (Bernalillo County), All Faiths (Bernalillo), Desert View (San Juan County) La Casa (Chavez County), UNM Behavioral Health (Sandoval County) and All Faiths (Valencia County). As of the end of Q3 of the current fiscal year 650 children/youth have been enrolled in Wraparound. Outcomes include: reduced costs of care for community-based care versus out of home placements; improved school attendance and performance; increased behavioral and emotional strengths; improved clinical and functional outcomes; reduced suicide attempts; and decreased contacts with Law Enforcement. Eligibility includes: children and youth 4-21 years experiencing the following:
 - SED Diagnosis

- Multi-system involvement, current or historic; i.e. two or more systems involvement including Protective Services, Juvenile Justice, special education, or behavioral health;
 - At risk of or in an out-of-home placement, or previous out-of-home placement, incarceration, or acute hospitalization within a two-year period prior to evaluation; or
 - Functional impairment in: education, vocation, social, housing, legal, and/or intellectual and developmental disability
- *Youth Support Services (YSS)*: YSS is a BHS prevention effort-building resilience for youth 12-21 years of age. Youth Support Services is a life skills coaching model where the life skills coach provides hand over hand life skills with youth involved with PSD, JJS and youth at risk in the community. Youth determine the life skills they wish to work on with their coach. YSS is designed to work to support youth who are at risk in order to delay onset of substance use, or make a decision not to use drugs or alcohol. YSS is available in Taos, Farmington, Albuquerque, and in Hobbs.
 - YSS has served 292 youth from 7/1/2019-4/30/2020.
 - September-October 2019, the ASURE team teamed with Youth Move national and conducted the Youth Voice Agency Level Assessment (Y-VAL) in all of our 7 YSS Sites. Its purpose is to improve how organizations implement youth-driven practice. Youth driven practice means that own lives as well as the policies and procedures that affect them.
 - December 2019, the ASURE team conducted QSR with 3 of the YSS Providers. QSR measures how well the providers are adhering to the practice model and CYFD expectations by clearly and tangibly defining engagement and the actions of staff in engaging youth. It also provides quantitative and qualitative information to describe practice and performance of the larger child/family services system.
 - *The Nurtured Heart Approach (NHA) Demonstration*: The Nurtured Heart Approach is a proactive approach providing opportunities for success and competence building while setting limits and avoiding giving energy to negative behavior. BHS developed a cadre of certified trainers and two advanced trainers in NHA. A total of 17 BHS, PSD and NMSU staff are NHA trainers. BHS, PSD, New Mexico State University, New Day and New Mexico Solutions partnered to implement NHA in Sandoval County Protective Services and in the Youth Services Bureau. The NHA implementation team developed a supervisory and support model and an evaluation plan. In Sandoval County, supervisors, senior workers and the County Office Manager were trained and received support sessions in NHA. Leadership in Sandoval County used NHA in supervision to provide support to their staff. Youth Services Bureau (YSB) leadership in PSD and staff were trained in NHA and participated in support sessions. This provided the opportunity for YSB to apply the NHA

lens to YSB operations and problem solve concerns. The use of NHA allowed YSB to use NHA as an approach when working with youth.

In SFY20, BHS sent additional trainers from BHS and PS to the Nurtured Heart Approach training intensive in July 2019 in Fargo. BHS received carry over funding through the SOR grant to provide additional supports to CYFD Certified Trainers. In addition in FY20 and in FY 21, CYFD will work with Advanced Trainers and consultants to develop a sustainability plan and model for CYFD PS and BHS staff as well as for providers who work with CYFD families, children, and youth.

- *Infant Mental Health Services (IMH)*: IMH services are services for infants and young children, ages 0 to 5, who have experienced trauma and/or are experiencing mental health, attachment, and/or behavioral problems targeting the caregiver-infant relationship as the vehicle for restoring and protecting the infant's or young child's mental health. IMH providers are trained in Child Parent Psychotherapy (CPP) which provides clinical support to infants and their caregivers to restore and repair their relationship. BHS Infant Mental Health provides the following services for Protective Services Division:
 - *Infant Mental Health Team*: Provided to infants in the custody of CYFD Protective Services in order to work towards restoring and repairing the caregiver-infant relationship
 - *Foster Parent Program*: Works with infants and their foster parents in order to address developmental needs and concerns by providing developmental guidance and support to foster parents to decrease the risk of multiple placements.

Parent-Informed Psychotherapy (PIP): PIP services prioritize referrals from CYFD's Protective Services that include infants/young children and their families who are receiving In-Home Services or who have had an unsubstantiated investigation due to allegations of maltreatment.

Behavioral Health Planning Council (BHPC)

CYFD BHS collaborates with the BHPC on a variety of initiatives such as bringing up community based resources like high fidelity wraparound, family peer support, youth peer support, behavioral management services pilot.

May Mental Health Month

CYFD BHS staff are co-chairs on the Child and Adolescent Subcommittee (CASC) which helps make recommendations to the BHPC and the Governor on system level changes to improve the lives and children, adolescents and their families in New Mexico.

The CASC and the BHPC are sponsoring webinars every Friday from 12:30-1:30 to help folks who are struggling with mental wellness during COVID-19. These webinars are part of May Mental Health Month. Additionally, the CASC and BHPC are sponsoring QPR trainings (Question,

Persuade, and Refer) Gatekeeper Training for Suicide Prevention is a 1-2 hour educational program designed to teach lay and professional "gatekeepers" the warning signs of a suicide crisis and how to respond.

CYFD BHS statewide youth coordinators participated in a Youth MOVE national youth vision board virtual session on May 7th. Youth MOVE national discussed having youth make vision boards for themselves about what mental wellness meant to them.

Lastly, CYFD BHS is working with our providers to set up zoom hang out sessions for youth to discuss what May Mental Health means to them and how they maintain mental wellness during COVID-19.

PSD staff continue to partner and collaborate with their local CBHCs to ensure youth are being accurately assessed and their behavioral health needs are being addressed in the most effective and appropriate manner. Permanency Planning staff are expected to complete the Child and Adolescent Needs and Strengths (CANS) assessment of all children and youth on their caseloads and CBHCs remain available and accessible to permanency planning staff for consultation and/or support following the completion of the CANS as needed.

CBHCs, CBHC Supervisors and Deputy Director are actively engaged in preparing for and participating in the Coordinated Care Review meetings which focus on New Mexico youth who are placed in out of state RTCs. In addition, they assist with follow up tasks and activities identified during the review meetings by communicating those tasks and activities to the youth's Permanency Planning Worker as well as provide assistance and support to the PPW in completing those items. This involvement has improved the communication and coordination between CYFD, Managed Care Organizations and the RTCs which in turn has helped to ensure the youth are receiving the supports and services they need.

Joint efforts between CYFD BHS, PSD and JJS to address youth homelessness continue to move forward. One of those primary efforts is the planning and preparation for the rollout of Extended Foster Care for the first cohort of eligible youth in July 2020. In order to assist in that effort, workgroups composed of BHS, PSD and JJS staff along with community based providers met to discuss options to expand the existing Supportive Housing program that is managed by BHS and serves both PSD and JJS youth in Bernalillo County. In addition, PSD has taken on the role of the program management of the Resource Family Pilot Project which serves transition age youth who are in PSD custody or have aged out of care. The pilot project adds another safe and stable housing option as well as life skills development opportunities.

CYFD BHS is now in year two of their five year HTEP expansion grant. The focus of the work remains serving transition age youth by actively engaging and supporting partnerships between child and youth serving providers and adult serving providers. Through the efforts of BHS leadership, the HTEP Governance Team, the HTEP Anchor Sites, OPRE, PSD and JJS, both Wraparound for Transition Age Youth and the Youth Peer Support Program development and implementation efforts continue to move forward. In addition, Wraparound is available through

the following eight sites: Guidance Center of Lea County, Mental Health Resources in Roosevelt County, New Day as well as All Faiths in Bernalillo County, Desert View in San Juan County, La Casa in Chavez County, UNM Behavioral Health in Sandoval County, All Faiths in Valencia County. As this work continues, it is anticipated that the behavioral and mental health needs of transition aged youth will be better met because youth are no longer leaving systems completely when they exit the child serving systems.

2. Update to the Assessment of Current Performance in Improving Outcomes

Methodology

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

Baselines for each safety, permanency and well-being outcome reported on in the 2015-19 CFSP and subsequent ASPRs were obtained using QA data from calendar year 2013. Baselines for SACWIS measures were obtained using the average of the first three quarters of state fiscal year 2014. All targets were calculated using a "bootstrapping" technique based on guidance outlined in the April 23, 2014, Federal Register Notice of Statewide Data Indicators and National Standards for Child and Family Services Review (FR Doc. 2014-09001).

PSD used QA data from calendar years 2011, 2012 and 2013 to calculate the mean and standard deviation. PSD used SACWIS data from state fiscal years 2012, 2013 and 2014 to calculate the mean and standard deviation. Targets were then calculated using the recommended four standard deviations above the mean. New Mexico's 2015 – 2019 Child and Family Services Plan set targets specifically for June 2019 of the Plan. PSD targets for each year as well as the five year period could be impacted by the CFSR items being reviewed differently. Any impact will be reported out in the first APSR.

In August of 2014, the PSD Quality Assurance Unit began using the new round three on-site review instrument (OSRI). Due to this switch, calendar year 2014 data includes only a partial year of data (August – December 2014).

Calendar year 2015 marked the first full year of QA data using the round three on-site review instrument (OSRI). Sections A, B and C below contain data for outcomes and items from 10 counties selected for review during the 2015 calendar, of which six were selected for review for round three of the Child and Family Service Review (CFSR). Bernalillo, Dona Ana, San Juan, San Miguel, Sandoval and Chaves counties were reviewed from April to September 2015 as part of the CFSR; results from the CFSR are included in the data roll-up for the Safety, Permanency and Well-being Outcomes tables below.

The calculations methods for the baselines and targets remain the same as those reported in the 2015 – 2019 Child and Family Services Plan, except for Item 6 on the round 3 OSRI, which is now a roll-up of several items that were on the round two OSRI. The target for Item 6 was calculated using the same “bootstrapping” technique based on guidance outlined in the April 23, 2014, Federal Register Notice of Statewide Data Indicators and National Standards for Child and Family Services Review (FR Doc. 2014-09001). PSD used percentages for Item 6 from calendar years 2014 and 2015.

Safety Outcomes 1 and 2

	Baseline	CY 2015 Data	CY 2016 Data	CY 2017 Data	CY 2018 Data	CY 2019 Data	Target
Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.							
At least 96.8% of cases reviewed will be rated as “substantially achieved” on Safety Outcome 1 of the CFSR-OSRI.	84%	75%	89%	85.5%	85.1%	88.42%	85.8%
Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment							
At least 96.8% of cases reviewed will be rated as a “substantially achieved” on Item 1 of the CFSR-OSRI.	84%	75%	89%	85.5%	85.1%	88.42%	96.8%
Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.							
At least 75.4% of cases reviewed will be rated as “substantially achieved” on Safety Outcome 2 of the CFSR-OSRI.	49.7%	45%	56%	53.2%	52.2%	60.65%	75.4%
Item 2: Services to Family to Protect Children in the Home and Prevent Removal or Re-Entry Into Foster Care.							
At least 98.6% of cases reviewed will be rated as “substantially achieved” on Item 2 of the CFSR-OSRI.	65%	56%	51%	53.4%	46.4%	60.71%	98.6%
Item 3: Risk and Safety Assessment and Management.							
At least 83.1% of cases reviewed will be rated as “substantially achieved” on Item 3 of the CFSR-OSRI.	55%	48%	57%	57.1%	54.5%	63.87%	83.1%

Safety Outcome 1

“Children are first and foremost protected from abuse and neglect” increased from a substantially achieved rating of 85.1% for calendar year 2018 to 88.42% in 2019. PSD has continued implementation of the pre-initiation staffing strategy targeting this outcome. The goal of the pre-initiation staffing process is to improve timeliness of initiation of investigation and the initial assessment of safety and risk through face to face supervision at the assignment of a report for investigation. Although the procedure for the pre-initiation staffing has been implemented statewide, there has been some inconsistency in the implementation of this practice. Barriers to achieving timely initiation have been primarily due to late initiations of Priority 2 reports.

Safety Outcome 2

“Children are safely maintained in their homes whenever possible and appropriate” rose from 52.2% substantially achieved in 2018 to 60.65% in 2019. CYFD has continued to expand key initiatives including accessible childcare for children at risk of maltreatment and the warm hand-off. The warm hand-off strategy aims to link families to needed safety related services in a timely way. Although there continue to be some delays and gaps in services in more rural areas, particularly related to substance abuse treatment and domestic violence treatment, the agency has made strides in targeting contracts to areas of the state with the greatest need and clarifying performance measures for contract providers.

Ongoing Practice Improvement Efforts

PSD continues to partner with the National Center on Crime and Delinquency (NCCD) and has implemented Safety Organized Practice and a new Safety and Risk Assessment tool. All PSD supervisors have been trained in Safety Organized Practice as well as the new Safety and Risk Assessment tools. Casey Family Programs and NCCD continued in 2018 to provide coaching in the county offices to build capacity. The new Safety and Risk tool was launched in May 2019. It is anticipated that improved assessment of risk and safety and better safety planning will improve this outcome.

Permanency Outcomes 1 and 2

	Baseline	CY 2015 Data	CY 2016 Data	CY 2017 Data	CY 2018 Data	CY 2019 Data	Target
Permanency Outcome 1: Children have permanency and stability in their living situations.							
At least 36% of cases reviewed will be rated as “substantially achieved” on Permanency Outcome 1 of the CFSR-OSRI.	32.2%	26%	21%	25.6%	22.1%	34.58%	36%
Item 4: Stability of Foster Care							
At least 79.2% of cases reviewed will be rated as “substantially achieved” on Item 4 of the CFSR-OSRI.	60.2%	64%	61%	75.6%	74.7%	71.96%	79.2%
Item 5: Permanency Goal for Child							
At least 95.4% of cases reviewed will be rated as “substantially achieved” on Item 5 of the CFSR-OSRI.	73.3%	72%	61%	61.9%	64%	69.31%	95.4%
Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement							
At least 58% of cases reviewed will be rated as “substantially achieved” on Item 6 of the CFSR-OSRI.	34%	40%	43%	35.6%	34.7%	47.66%	*58%
Permanency Outcome 2: The continuity of Family Relationships and Connections is Preserved for Children.							

At least 68.9% of cases reviewed will be rated as “substantially achieved” on Permanency Outcome 2 of the CFSR-OSRI.	42.4%	52%	53%	57.8%	61%	63.55%	68.9%
Item 7: Placement with Siblings							
At least 98.3% of cases reviewed will be rated as “substantially achieved” on Item 7 of the CFSR-OSRI.	81.3%	84%	75%	79.1%	85.5%	77.22%	98.3%
Item 8: Visiting with Parents and Siblings in Foster Care.							
At least 75.7% of cases reviewed will be rated as “substantially achieved” on Item 8 of the CFSR-OSRI.	44.1%	52%	54%	50.6%	54.7%	65.71%	75.7%
Item 9: Preserving Connections							
At least 95.5% of cases reviewed will be rated as “substantially achieved” on Item 9 of the CFSR-OSRI.	65.8%	54%	50%	56.5%	57.6%	66.04%	95.5%
Item 10: Relative Placement							
At least 87.9% of cases reviewed will be rated as “substantially achieved” on Item 10 of the CFSR-OSRI.	68.2%	67%	61%	70.8%	55.3%	59.81%	87.9%
Item 11: Relationship of Child in Care with Parents							
At least 75.4% of cases reviewed will be rated as “substantially achieved” on Item 11 of the CFSR-OSRI.	39.6%	57%	72%	62.9%	62.5%	81.82%	75.4%

Permanency Outcome 1

“Children have permanency and stability in their living situations” decreased from 22.1% substantially achieved rating in 2018 to 34.58% in 2019. This is largely an area of concern for PSD, and there has been a lack of progress made in key initiatives related to this outcome.

PSD has trained supervisors statewide in the Collaborative Assessment and Planning (CAP) framework and all counties have implemented the 90 day staffing plan. NCCD and Casey Family programs have provided coaching to support implementation of the framework.

PSD has not made improvements in stability of foster care placements, however the agency has continued to focus on recruitment and support for relative foster homes. We have made consistent progress in placement stability over the last year or so. The federal measure of placement stability (placement moves per 1,000 days in foster care for children entering foster care in a rolling 12 month period) was 8.14 as of July 31, 2019. This decreased steadily throughout the year. The 12-month period ending May 31, 2020 was 5.92 moves per 1,000 days in care.

Based upon case review data, PSD continues to do well establishing appropriate goals in a timely manner when children enter care, but there are concerns related to timely change of plan when reunification is no longer viable and timely motion to terminate parental rights.

PSD is working with the Court Improvement Project to address barriers presented by the courts related to change of plan and is closely monitoring change of plan through data reports to assist managing attorneys in providing supervision. This issue is most acute in the state's metro area where high attorney caseloads and full court dockets present a challenge. In addition, the state's adoption backlog cases (children who are freed and awaiting finalization) continue to inflate case numbers. We have made no progress on this. In September of 2019, 73% of children who were TPR'd 12 months prior were adopted within 12 months of TPR. As of May of 2020, only 25% of children TPR'd 12 months prior were adopted over the next 12 months.

Over the past year, the Chief Children's Court Attorney and the Field Deputy Directors have met regularly to staff these adoption backlog cases and move these children to permanency. The agency is seeing incremental progress as more of the long stayers (children in care 24+ months) are achieving adoption and guardianship. The Courts have been working with PSD to ensure these children are prioritized for permanency. It is anticipated that the outcomes related to permanency will improve as caseloads are reduced.

Permanency Outcome 2

"The continuity of Family Relationships and Connections is Preserved for Children" saw improvement in the past year, from 61% in 2018 to 63.55% in 2019.

PSD has made improvements in the items related to frequent and quality visits with children in foster care and their mother, father and siblings placed in a different home, preserving connections and children relationship with their parents (outside of visitation).

The agency has been working on recruiting foster homes that can maintain siblings and has been working on trying to place siblings together since the onset of the case, however there was still a decrease in this item. The agency has made strides in having more frequent and quality visits between children in foster care and their parents and also improving visits between children in foster care and their siblings placed in a different home.

The agency has been working on having more community visits and in the metro area changes have been made in regards to having more private visits between children and their families rather than meeting in one large room and have many families visiting with their children at the same time.

PSD continues to work with the Capacity Building Center for States to develop strategies related to these outcomes, monitor progress, and evaluate program initiatives.

Permanency outcome strategies and activities were developed based on the progress made since the first submission of Plan for Improvement in the 2015-2019 Child and Family Service Plan (CFSP), and the results of the Child and Family Service Review. Development of permanency

strategies and activities also included information gathered from individual meetings with staff from the five regions within the state, information and data garnered from STEP (Striving Toward Excellence Program) and Office Hours experiments, and information learned from PSD's participation in the Diligent Recruitment grant. A number of activities are currently underway to improve safety outcomes for children. These activities are detailed in the most recent CFSR PIP below.

In 2020-24, CYFD has committed to two new strategies to improve permanency outcomes:

- A pilot with ALTSD to develop a subsidized guardianship program for children who are not federally eligible.
- The implementation of the federal option to allow Customary Tribal Adoptions for ICWA-eligible youth, increasing the cultural responsiveness of adoptions, including those that do not rely on the termination of parental rights. In early 2019, the New Mexico House of Representatives passed House Memorial 51, which recognizes the interdependence of CYFD and New Mexico's tribes and pueblos in providing for children who cannot remain safely at home, and commits the department to consulting and collaborating with New Mexico's Indian nations, tribes and pueblos to develop a tribal customary adoption plan, policies and procedures and to consider legislative recommendations for review and approval by New Mexico's Indian nations, tribes and pueblos and the Secretary of Children, Youth and Families. The memorial requires that the proposed customary adoption plan, policies and procedures and legislative recommendations be presented to the interim legislative committee dealing with Indian affairs by November 1, 2019. CYFD will include the plan in future APSRs.

Permanency Outcome 5

"Permanency Goal for the Child" has improved from last year, from 61.9% in 2018 to 64% in 2019. However, PSD has not achieved its target of 95.4% for this goal. It is the one remaining item in the PIP that was not met. PSD believes that consistent use of 90-day case staffings and the Safety Organized Practice model will lead to steady progress in meeting this goal. Quality Assurance will continue to conduct onsite reviews of PIP sites to assess performance in this area and hopefully exit this PIP item by the end of CY 2020.

Well-being Outcomes 1, 2 and 3

	Baseline	CY 2015 Data	CY 2016 Data	CY 2017 Data	CY 2018 Data	CY 2019 Data	Target
Well-Being Outcome 1: Families Have Enhanced Capacity to Provide for Their Children's Needs.							
At least 48% of cases reviewed will be rated as "substantially achieved" on Well-Being Outcome 1 of the CFSR-OSRI.	26.4%	43%	34%	35.7%	33.6%	56.77%	48%
Item 12: Needs and Services of Child, Parents, and Foster Parents							

At least 51.5% of cases reviewed will be rated as “substantially achieved” on Item 12 of the CFSR-OSRI.	29.1%	45%	38%	37.3%	33.6%	57.42%	51.5%
Item 13: Child and Family Involvement in Case Planning							
At least 88.1% of cases reviewed will be rated as “substantially achieved” on Item 13 of the CFSR-OSRI.	58.4%	64%	69%	68%	53.7%	71.55%	88.1%
Item 14: Caseworker Visits with Child							
At least 93.5% of cases reviewed will be rated as “substantially achieved” on Item 14 of the CFSR-OSRI.	81.1%	79%	77%	77.8%	76.1%	88.39%	93.5%
Item 15: Caseworker Visits with Parents							
At least 65% of cases reviewed will be rated as “substantially achieved” on Item 15 of the CFSR-OSRI.	32.6%	51%	43%	50.5%	44.6%	71.09%	65%
Well-Being Outcome 2: Children Receive Appropriate Services to Meet Their Education Needs.							
At least 97.6% of cases reviewed will be rated as “substantially achieved” on Well-Being Outcome 2 of the CFSR-OSRI.	77.4%	94%	86%	77%	65.4%	80.8%	97.6%
Item 16: Educational Needs of the Child							
At least 97.6% of cases reviewed will be rated as “substantially achieved” on Item 16 of the CFSR-OSRI.	77.4%	94%	86%	77%	65.4%	80.8%	97.6%
Well-Being Outcome 3: Children Receive Adequate Services to Meet Their Physical and Mental Health Needs.							
At least 75.8% of cases reviewed will be rated as “substantially achieved” on Well-Being Outcome 3 of the CFSR-OSRI.	64.3%	59%	66%	58.9%	51.9%	61.74%	75.8%
Item 17: Physical Health of the Child							
At least 90.2% of cases reviewed will be rated as “substantially achieved” on Item 17 of the CFSR-OSRI.	76.9%	66%	87%	72.8%	72.3%	77.04%	90.2%
Item 18: Mental/Behavioral Health of the Child							
At least 87.4% of cases reviewed will be rated as “substantially achieved” on Item 18 of the CFSR-OSRI.	73.3%	80%	67%	63.9%	53%	63.55%	87.4%

Well-being Outcome 1

Indicators for “families have enhanced capacity to meet their children’s needs” saw improvement in the past year and achieved the target, from 33.6% in 2018 to 56.77% in 2019.

Based upon case review by the QA team, the areas of concern include assessing for the needs of children and parents, engagement with parents and provision of services, gaps in services area particularly related to domestic violence, substance abuse and relapse prevention services and lack of providing services to address the needs of children, parents and foster parents.

PSD continues to anticipate that these items will improve as the 90 day staffing initiative and worker-parent visit strategy are fully implemented, but progress is slower than anticipated.

Based upon case review by the QA team, the areas of concern include lack of active case planning with parents and children in both foster care and in-home services cases.

There has been a continued lack of quality visits between workers and children and children above the age of 1 not being met with alone, however the agency has increased its frequency of visits and is continuing to work on addressing the quality of worker/child visits.

There are also concerns regarding both the frequency and quality of visits between caseworkers and parents. There is a lack of efforts made to visit with parents and also a lack of addressing case plans and barriers with parents which also affects addressing safety, permanency and wellbeing. PSD has continued to utilize the worker/parent visits strategy statewide and has integrated documentation in FACTS similar to how worker/child visits are entered. The focus of this strategy is to improve engagement with parents and ensure ongoing assessment by requiring the worker to visit parents at least monthly where they live. PSD continues to collect monthly data reports and monitor these visits. There has been a slow, but steady increase in the number of documented visits since data reporting became available. PSD continues to focus efforts on improving engagement skills and addressing worker safety concerns related to this practice through ongoing training.

Well-Being Outcome 2

“Education needs of the child” saw improvement in the past year. In 2018 this outcome was rated at 65.4% and is now at 80.8% in 2019.

Based upon case review, it was determined that in most instances the agency made good efforts around assessment of educational needs, but failed to make concerted efforts to advocate for needed services especially when there were changes in placement or school. It was determined, once again, that the agency often relies on the foster parent to advocate around education, but is not providing adequate case management, especially when there are changes.

Well-Being Outcome 3

“Children receive adequate services to meet their physical and mental health needs” improved from 51.9% substantially achieved in 2018 to 61.74% in 2019.

With respect to physical health needs, in both In Home and Foster Care cases the agency made efforts to ensure there were timely well-child exams and dental visits, but did not make concerted efforts to ensure timely follow up with hearing tests, vision exams, and specialists.

As previously mentioned, in foster care cases, this follow up was often left to the foster parent with inadequate oversight by the agency. This oversight was impacted when there were placement changes. Similar issues related to agency oversight were identified related to addressing the mental and behavioral health needs of children in foster care. It was also identified that some of the behavioral health services that children were receiving were not

adequate to address their needs, including specialized services for children with significant trauma history and sexual abuse history. Some of this was attributed to service array gaps in rural parts of the state.

Addressing these issues is a continued area of focus for PSD work with the Capacity Building Center in 2019. Although PSD has initiated work to revitalize the medical passport (Travelling File) to ensure continuity of care in the event of a placement change and is developing changes to FACTS to ensure better documentation and data collection related to the physical and mental health needs of children, there continue to be struggles with the agency documenting or collecting records in regards to children physical, dental and mental/behavioral health.

Well-being outcome strategies and activities were developed based on the progress made since the first submission of Plan for Improvement in the 2015-2019 Child and Family Service Plan (CFSP), and the results of the Child and Family Service Review. Development of these strategies and activities were also based on information gathered from individual meetings with staff from the five regions within the state, the Cabinet Secretary's strategic plan, and PSD's on-going partnership with the CYFD Behavioral Health Division. Further, these activities are detailed in the most recent CFSR PIP, as articulated below.

Current CFSR PIP Results

Overall PIP Process and Findings

New Mexico CYFD participated in the third round of the Child and Family Services Review (CFSR) in 2015. The state was approved by the Children's Bureau to conduct a self-review. Upon completion of the review, CYFD implemented a comprehensive Program Improvement Plan aimed at improving key outcome areas identified in the review.

Since that review, CYFD has maintained an ongoing case review schedule utilizing the CFSR on Site Review Instrument (OSRI) and the same approved review procedures including a peer review process, random sampling, two levels of quality assurance oversight, and random oversight of reviewed cases by representatives of the Children's Bureau.

New Mexico has not yet resolved all items identified for improvement in the PIP. The Children's Bureau extended the state's reporting period through March of 2020. CYFD participated in ongoing case reviews from October 2019-March 2020 in order to ensure ongoing monitoring of the PIP and expand the opportunity to report case review results as part of formal PIP measurement. All outstanding Items were met with the exception of Item 5, Permanency Goal of the Child. CYFD has been granted the opportunity to continue assessing progress on this goal by the Children's Bureau, and will conduct ongoing PIP site reviews through the remainder of 2020.

Year by Year Measurements of Program on 2016-19 CFSR PIP

The following table presents year by year measurements of CYFD's progress on the items included in the PIP. The most recent rolling period ending March 2020 is also included.

CFSR Items Requiring measurement	Item Description	PIP Baseline	CFSR 2016 Results	CFSR 2017 Results	CFSR 2018 Results	CFSR 2019 Results	Rolling Period	PIP Goal
Item 1	Timeliness of Initiation of Investigations of Reports of Child Maltreatment	70.3%	83%	83.33%	85.11%	82.61%	96%	79.9%
Item 2	Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry into Foster Care	61.9%	64%	62.79%	50%	67.5%	71.2%	71.5%
Item 3	Risk and Safety Assessment and Management	49.2%	50%	58.33%	54.17%	58.33%	61.1%	57.2%
Item 4	Stability of Foster Care	65%	69%	75%	68.75%	60.42%	81.3%	74.7%
Item 5	Permanency Goal for Child	73.7%	58%	60%	67.39%	71.74%	79.1%	82.8%
Item 6	Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	40%	35%	33.33%	33.33%	39.58%	54.2%	49.9%
Item 12	Needs and Services of Child, Parents, and Foster Parents	49.2%	44%	38.89%	30.56%	55.56%	62.5%	57.2%
Item 12 a	Needs Assessment and Services to Children	84.6%	78%	72.22%	54.17%	77.78%	77.8%	NA
Item 12b	Needs Assessment and Services to Parents	47.3%	50%	40.68%	30.19%	65.0%	65.1%	NA

Item 12c	Needs Assessment and Services to Foster Parents	89.7%	88%	83.72%	64.44%	70.83%	95.6%	NA
Item 13	Child and Family Involvement in Case Planning	64.1%	75%	75%	53.13%	73.53%	78.9%	71.7%
Item 14	Case Worker Visits with Child	78.5%	76%	80.56%	79.17%	86.11%	77.8%	85%
Item 15	Caseworker Visits with Parents	54.5%	62%	60.34%	40.38%	68.33%	74.6%	63.1%

Proposed Expanded PIP Measurement Plan

In addition to the current on site case review schedule, CYFD conducted additional case review of the same six sites, from October 2019-March 2020. CYFD utilized the same sampling process and review procedure approved by the Children's Bureau for our CFSR and ongoing monitoring.

Review Dates	County	Region	Period Under Review	Sample Size
October 21-25, 2019	Bernalillo*	3	10/1/18-10/21/19	8 Foster Care 4 In Home (CYFD & Contract)
November 18-22, 2019	Dona Ana*	5	11/1/18-11/18/2019	8 Foster Care 4 In Home (CYFD & Contract)
December 16-20, 2019	San Juan*	1	12/1/18—12/16/19	8 Foster Care 4 In Home
January 2020 (Dates TBD)	Sandoval/San Miguel*	1 & 2	1/1/19-to date of review	8 Foster Care 4 In Home
February 2020 (Dates TBD)	Chaves*	4	8/1/19-date of review	8 Foster Care 4 In Home
March 2020 (Dates TBD)	Bernalillo*	3	3/1/19-date of review	8 Foster Care 4 In Home (CYFD & Contract)

48 Foster Care
24 In Home
72 Total

Ongoing CFSR PIP Goals and Strategies

The following are the CFSR PIP goals and strategies that are ongoing as of this writing. Full reporting on all CFSR PIP goals and strategies, including those that have been completed are contained in CYFD's 2015-19 Final Report.

Goal A: Children are maintained safely in their home or in their foster care placements and will not experience repeat maltreatment.

Strategy A1: Implement a pre-initiation staffing process to ensure timely initiation of investigation		
ACTIVITY	DUE DATE	PROGRESS
<u>Activity 5</u> : Share survey results with PSD management and make recommend adjustments to pre-initiation staffing process as needed.	11/30/2017 and On-going	<p>Completed. The results of the survey monkey will be on the agenda for the PIP Strategies and Activities Review meeting schedule for January 17, 2018. The purpose of this meeting is to review the PIP strategies and activities to evaluate whether or not these strategies and activities are impacting our CFSR measures.</p> <p>The results of the survey monkey were shared with PSD management during the PIP Strategies and Activities Review meeting. Results indicated that pre-initiation staffings are being done, but some staff felt the filling out the form was time consuming and spend more time filling out the form than holding an actual staffing. Staff stated they generally find pre-initiation staffings helpful, but would like to use a shorter form.</p>

Strategy A4: PSD staff will improve communication and engagement with community providers to improve safety outcomes and reduce repeat maltreatment.		
ACTIVITY	DUE DATE	PROGRESS
<u>Activity 4</u> : Assess impact of "warm hand-offs" on repeat referrals.	On-going	<p>On-going. Family Support Services, In-Home Services, and Time Limited Reunification contracts with PSD contain requirements for ensuring that PSD worker, and contractor service provider engage the parent or family when a referral is made. The PSD Community Services Bureau will begin looking at the impact of repeat referrals in those counties with these</p>

		contracted service providers in comparison to those counties that do not have these types of contracted services. Additionally, the Community Services Bureau Domestic Violence Unit staff has been providing technical assistance to contracted Domestic Violence agencies across the state on the positive impact of warm-hand offs with clients. Many of the Domestic Violence agencies have implemented warm-hand offs when making referrals for their clients. This is especially beneficial for survivors of domestic violence who need the extra support in seeking out the appropriate referrals to obtain safety and shelter.
<u>Activity 5</u> : Review “warm hand-off” with PSD management and make adjustments as needed.	On-going	<p>Ongoing. The warm hand off process will be evaluated and adjusted as needed once it is rolled out statewide with Safety Organized Practice and Structured Decision Making Model.</p> <p>The warm hand off procedure will be reviewed to incorporate feedback from field staff and contracted providers as part of continuously improving this process.</p>

Goal B: Children will have permanency and stability in their living situations.

Strategies and activities contained in Goal B were developed to positively affect Permanency Outcome 1, Items 4, 5, and 6; Permanency Outcome 2, Items 7, 8, 9, 10 and 11; Well-being Outcome 1, Items 14 and 15; and Systemic Factors Case Review System and Foster Parent Licensing, Recruitment and Retention.

Goal B strategies and activities were developed based on the progress made since the first submission of Plan for Improvement in the 2015-2019 Child and Family Service Plan (CFSP), and the results of the Child and Family Service Review. Development of Goal B strategies and activities also included information gathered from individual meetings with staff from the five regions within the state, information and data garnered from STEP (Striving Toward Excellence Program) and Office Hours experiments, and information learned from PSD’s participation in the Diligent Recruitment grant.

Strategy B1: Improve timeliness of permanency for children in care through streamline case staffing process and data informed decision making.		
ACTIVITY	DUE DATE	PROGRESS
<u>Activity 2</u> : Meet with Court Improvement Project and Administrative Office of the Courts to identify barriers that impede case	12/31/2016 and On-going	Completed. Agency representatives are currently participating in a task force sponsored by the Court Improvement Project specifically mandated with assessing the barriers to permanency and

progress and gather input to aid case staffing process.		<p>developing strategies to address barriers. The group has evaluated data from the agency and the court's information system to assess potential systemic barriers to permanency and conducted a qualitative review of the system based on a sample of cases out of Bernalillo County. The group is developing strategies to address barriers in three court jurisdictions (2nd, 6th, and 12th).</p> <p>CCIC has formed a sub group that is currently travelling around the state to identify potential barriers to permanency in the counties they visit, then to come up with strategies to improve time to permanency. Members of the CCIC worked on prioritizing work around ensuring timely permanency for children.</p>
<u>Activity 3</u> : Prioritize referrals to Time Limited Reunification providers to focus children with a reunification plan who have been in custody for 12 months or less.	On-going	<p>On-going. An RFP was released for competitive bids to provide time-limited reunification services beginning in July 2017. TLR services began in late July 2017 after awards were finalized in Dona Ana, Lea, Bernalillo, Sandoval and Valencia counties and services continued in these counties in FY 18.</p> <p>In February 2018, the contract with the community based provider in Valencia County was terminated due to a lack of referrals meeting the required timeframe. Recognizing this challenge, with the combined RFP, CYFD is expanding its reunification services to include children returning home from Foster Care or other out of home placements who are reunifying with their parents, other family members, or fictive kin, and anyone pursuing guardianship. In addition to this expansion, CYFD will maintain a focus on reunifying families in an expedited timeframe (less than 15 months) by retaining the TLR service model.</p>

Strategy B2: Increase number of licensed foster homes in all regions through target recruitment and improved customer service.		
ACTIVITY	DUE DATE	PROGRESS
<u>Activity 1</u> : Track progress in reducing time frames to licensure with the launch of foster parent navigators.	On-going	<p>On-going. Tracking of licensure timeframes for potential licensed foster families continues to be monitored. Prospective families are not readily engaging in support services offered by navigators after foster parent applications are submitted. This is possibly due to the high turnover of the contracted navigators.</p>

		<p>Ongoing evaluation of the services provided by contracted navigators has proven not to be beneficial in reducing licensing timeframes for prospective families.</p> <p>Therefore, the contractual funding portion of this program will cease at the end of fiscal year 18. However, the agency full-time navigator employees in collaboration with agency placement staff will continue the responsibility of providing support services to prospective families. Support service efforts will continue to be provided by the navigator employee on a more regionally assigned basis.</p> <p>Navigator efforts including both employed staff and contracted were evaluated quarterly to measure timeframes of licensure achievement. In 2018:</p> <ul style="list-style-type: none"> • From January 2018 to March 2018 there were 55 families who achieved licensure. • Of the 55 families licensed this quarter 30 (55%) achieved licensure in less than 120 days. <p>PSD has also developed a Statewide Foster Care State Plan outlining goals to assist PSD in recruiting and retaining foster homes statewide. These goals include:</p> <ul style="list-style-type: none"> Goal 1: Ensure FACTS Data is entered timely and accurately Goal 2: License Foster Homes within 120 Days Goal 3: Increase the Number of Licensed Foster Parent Homes Goal 4: Increase the Retention of Current Licensed Homes Goal 5: Train CYFD Placement Staff to help support Foster Parents <p>The plan requires that data entry into FACTS is done timely and correctly to ensure that the information extracted for recruitment and retention plans is useful. This data is being monitored through various reports and addressed with each county when needed. The goal is to have each county based recruitment team (CBRT) meet on a monthly basis to develop and update their retention and recruitment plans (RRP). Meetings in each county have been taking place each month since January 2018. Feedback from these meetings</p>
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		<p>are beginning to show service delivery gaps and where each county needs to improve.</p> <p>The plan also requires that PSD placement workers and supervisors receive job specific training on their various job assignments at the time of hire and throughout their career with CYFD. In March 2018 the agency hired a PSD Training Director and will soon be hiring regional trainers. The goal is to ensure that they have the skill set and resources to recruit and support foster and adoptive families. This includes licensing families within 120 days and maintaining a working relationship with licensed providers. PSD is in the process of developing a request for proposal for a web-based application / foster care software that will assist in tracking inquiries, have an online application for prospective foster parents, track application approvals, other required paper work until licensure. The goal is to cut down the amount of time PSD workers currently spend on completing paperwork to license a family so that they are able to spend more time building and maintaining working relationships with the prospective family and licensed families.</p>
<p><u>Activity 2:</u> Provide quarterly technical assistance to county recruitment teams in the maintenance of their county target recruitment plans.</p>	<p>On-going</p>	<p>On-going. County Based Recruitment Team continue to meet monthly. The Foster Care and Adoption Bureau staff participates and provides feedback and guidance on data extraction, technical assistance, and strategy development. A statewide folder on the agency share drive was created for each county to save meeting minutes, staff sign in sheets, and recruitment and retention plans.</p> <p>In January 2018 the Foster Care Program Specialist met with each County Office Manager statewide to evaluate staff membership and participation in monthly County Based Recruitment Team meetings. Webinars were facilitated with each county office to identify barriers in the development and utilization of targeted recruitment planning concepts and worksheets. One barrier that was identified was difficulty with the data extraction required to complete the worksheets. There were discrepancies in data collection, and data was incorrectly entered into the agency database. It was determined that more training was needed, and that data collection needed to be consistent across the state.</p>

		<p>A small workgroup was created to review and make modifications to the targeted planning worksheets to align with agency data collection and to provide an evaluation component that will be beneficial to reporting on the goal achievement or barriers on a monthly basis. The worksheets are going through a final review and approval process. The revised worksheets were piloted in Luna and Sierra counties in May 2018. During the pilot it was identified that some minor changes are still necessary to help with data collection on worksheet #2. The workgroup will meet again in July 2018 to address the feedback and necessary changes to the worksheets that are still needed.</p>
<p><u>Activity 3:</u> Contract with a company who has the ability to provide a self-service mechanism in which prospective foster parents can check the status of their application/ licensing process. If funding is not available, PSD will develop an alternative method of notifying foster parents about the status of their foster parent application or licensure process.</p>	On-going	<p>On-going. PSD is in the process of developing a request for proposal for a web-based application / foster care software that will assist in tracking inquiries, have an online application for prospective foster parents, track application approvals, other required paper work until licensure. The goal is to cut down the amount of time PSD workers currently spend on completing paperwork to license a family so that they are able to spend more time building and maintaining working relationships with the prospective family and licensed families.</p>
<p><u>Activity 4:</u> Create and launch a blended learning platform for RAFT to provide more flexibility in initial training for new foster parents.</p>	On-going	<p>Ongoing. PSD implemented RAFT online as a blended learning curriculum for prospective foster and adoptive families with a statewide implementation beginning January 2017. The blended curriculum continues to give foster and adoptive families another training option in the licensing process. The website will continue to provide additional resources for families. PSD added Safe-Sleep E-Learning to the curriculum. As part of the PIP, PSD plans to add two more lessons which will include sibling relationships and relative connections. The website is not yet available in Spanish, however, the goal is to have it ready by the end of next fiscal year.</p> <p>The Foster care and adoptions will be working with the Research Assessment Data Bureau to develop a survey for staff and foster parents. The survey will evaluate the effectiveness of the blended curriculum.</p>

Strategy B4: Support and preserve family connections for children, and increase safe and appropriate kinship placements for children in foster care.

ACTIVITY	DUE DATE	PROGRESS
<p><u>Activity 2</u>: Based on information gathered from Activity 1, develop strategies and implementation changes in practice in engaging relatives</p>	<p>On-going</p>	<p>On-going. The Relative Connections Team was formed in January 2018. The goal of this group is to improve overall communication, engagement and connections for relatives involved with PSD.</p> <p>Four subgroups were developed and include the following:</p> <ol style="list-style-type: none"> 1. Culture and Climate workgroup, this group will identify the culture of the agency and considerations that impact decision making in relative placements. 2. Policy and Procedure workgroup, this group will be examining policies and procedures relative to relative engagement. 3. Data workgroup, this group will dive deeper into the agency data surrounding relative placement. The group in collaboration with the CBCS developed a survey for supervisors with the objective of learning differences and similarities across counties in the areas of Initial Relative Assessments, genograms, ice breakers, relative search, worker attitudes, culture, and supports. The survey is slated to go out the first week of July 2018. Survey results will be analyzed and presented to all team members at the end of July 2018. Results will help PSD create a theory of change and subsequently program development and evaluation. 4. Messaging Workgroup, the charge of this group is to examine how relative connections is messaged throughout policy, procedures, differences amongst regions and counties. Results from the survey will assist the group in drafting messages that will ultimately convey the work of the entire team. <p>Chauncey Strong with the CBCS provided two presentations during the 2018 Children's Law Institute. The workshops were "Unpacking the No" which addressed the importance of permanency and provided an overview of national data on older youth in foster care, major policy changes in foster care, definition of permanency, concept of permanency for youth, and strategies on how to change an initial "no" to permanency to "yes."</p>

		<p>“My Brother’s Keeper” This workshop discussed sibling connections in foster care. It highlighted the value of sibling connections and presented strategies to successfully address sibling issues.</p> <p>PSD and BHS collaborated in FY 18 to develop and implement three sibling camps to ensure siblings who were not placed together had an opportunity to visit each other. Sibling Camps were provided by Santa Fe Mountain Center-a therapeutic adventure program. One sibling camp occurred in the northeast region and two sibling camps took place in Bernalillo county. All youth surveyed stated they enjoyed the camp and would attend again. The plan for FY 19 is to provide four sibling camps.</p>
<u>Activity 3</u> : Work with stakeholders to develop an advisory group to assist PSD in the ensuring relative connections are a priority within the division.	05/31/2019	Completed. This activity is ongoing and continues to be in the work plan with the CBCS as part of the development and implementation of the relative connections team. PS has created and hired a Kinship Navigator who is tasked with supporting the relative connections advisory group.

Strategy B5: Improve frequency and quality of visitation.

ACTIVITY	DUE DATE	PROGRESS
<u>Activity 5</u> : Implement special population review protocol to assess frequency and quality of sibling visitation to include the re-evaluation of sibling separation	Beginning 6/30/2017 and On-going	<p>Completed and Ongoing. The review focuses on items 8 and 14 of the CFSR On Site review instrument. A random sample of children are selected for review. The sample was stratified to include both children placed in family settings and those placed in non-family settings. There is a three month period under review. The review of the metro region was completed in June 2017. A final report was issued and a debriefing held with executive management and county leadership.</p> <p>The SW region review was completed in September 2017 and a final report issued in October 2017. A random sample of 40 children were selected for review. The sample was stratified to include both children placed in a family setting and those placed in non-family settings. A debriefing was held with executive management and county leadership.</p> <p>The NW region review is currently underway and scheduled to be complete by the end of January 2018. The NE and SE regional reviews are scheduled to be complete by June 2018.</p>

		The QA Unit is in the process completing the NE and SE regional review. Results of the review will be shared with regional managers and PSD executive management.
<u>Activity 6</u> : Use data from special population review to inform supervisors, managers, and bureau chiefs.	On-going	Completed. Results of the special population review will be shared with regional managers and PSD executive management.

Goal C: Foster and birth parents have enhanced capacity to provide for their children's needs and children will receive services to meet their physical and mental health needs.

Strategies and activities contained in Goal C were developed to positively affect Well-being Outcome 1, Items 12 and 13; Well-being Outcome 3, Items 17 and 18; and the Systemic Factor Service Array and Resource Development.

Goal C strategies and activities were developed based on the progress made since the first submission of Plan for Improvement in the 2015-2019 Child and Family Service Plan (CFSP), and the results of the Child and Family Service Review. Development of Goal C strategies and activities were also based on information gathered from individual meetings with staff from the five regions within the state, the Cabinet Secretary's strategic plan, and PSD's on-going partnership with the CYFD Behavioral Health Division.

Strategy C2: Implement NM Wraparound CARES; provide training to support implementation and improve parental engagement in case planning		
ACTIVITY	DUE DATE	PROGRESS
<u>Activity 1</u> : Provide Wraparound facilitator training in targeted areas.	Ongoing	On-going. CYFD BHS was awarded a Substance Abuse and Mental Health Services Administration (SAMHSA) Systems of Care and subsequent Systems of Care Expansion grant (currently in year three of the four year grant) to develop and implement a sustainable Wraparound model for New Mexico; New Mexico Wraparound CARES (Comprehensive, Accessible, Responsive, Effective, and Strengths-Based). The New Mexico Wraparound CARES Immersion Program follows a training and coaching model. This intensive training and oversight prepares each participant to function fully and independently as a Wraparound Facilitator. Through the SAMHSA systems of care Expansion grant, BHS funds a Wraparound Unit consisting of two Wraparound

		<p>Coordinators. This team provides training and a structured coaching process to Wraparound Facilitators both internal to the Department and externally with providers.</p> <p>In SFY'18 BHS finalized High-Fidelity Wraparound Facilitator credentialing with the NM Credentialing Board for Behavioral Health Professionals (NMCBBHP), to include the protocols for training, coaching, ethics, exams, and re-certification. In SFY'18, ten Wraparound Facilitators passed the NMCBBHP Wraparound credentialing exam; two of the ten were PSD staff. Eight additional Wraparound Facilitators will be invited to take the exam in June 2018.</p> <p>BHS is implementing two High-Fidelity Wraparound care management structures for children with complex behavioral needs and their families: (1) External structures through collaboration with behavioral health providers, as well as a collaborative demonstration project collaboration with a Managed Care Organization (MCO) and Provider and through two CareLink New Mexico Health Homes; and (2) Internal CYFD structure through dedicated positions within its Juvenile Justice Services (JJS) division.</p> <p>BHS continues to partner with two Managed Care Organizations and a provider in Bernalillo County to implement a demonstration of the High-Fidelity Wraparound Delivery and Financing Model to serve high-need and high-risk children, youth, and their families. In this model, the provider is paid a per-member, per-month (PM/PM) payment that includes a specific package of services and is sufficient to cover the costs of intensive care coordination and related activities. In January 2018, the target population for this initiative was expanded to include PSD's Youth Services Bureau to implement Wraparound with youth transitioning out of foster care, ages 18-21 years. This initiative was targeted to serve up to eighty PSD involved children and youth; fifty-one PS-involved children and youth have been enrolled since spring 2017.</p> <p>New Mexico began implementation of High-Fidelity Wraparound in two Health Homes on April 1, 2018. Health Homes are part of CareLink New Mexico (CLNM), a program to coordinate the integration of care for Medicaid beneficiaries with a diagnosis of Serious Mental Illness (SMI) and/or</p>
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		<p>Severe Emotional Disturbance (SED). Health Home services include Comprehensive Care Management, Care Coordination, Prevention and Health Promotion, Comprehensive Transitional Care, Individual and Family Support Services, and Community and Social Support Service Referrals. Through intensive Care Coordination, the CLNM Health Home will establish multidisciplinary teams for each member to develop integrated service plans that address behavioral health needs and all co-morbidities. Two of these Health Home sites will be using High Fidelity Wraparound as the care coordination model for vulnerable children and youth who meet the eligibility criteria. The two Health Home providers are Mental Health Resources (covering Quay, De Baca, and Roosevelt Counties) and the Guidance Center of Lea County (covering Lea County). The goals of the CLNM Health Homes are to:</p> <ul style="list-style-type: none"> ● Promote acute and long term health; ● Prevent risk behaviors; ● Enhance member engagement and self-efficacy; ● Improve quality of life for individuals with SMI/SED; and ● Reduce avoidable utilization of emergency department, inpatient and residential services <p>As a complement to High-Fidelity Wraparound, CYFD developed a Family Peer Support model, to include curriculum development, training, implementation and certification. Family Peer Support Workers are primary caregivers who have “lived-experience” of being actively involved in raising a child who experiences emotional, behavioral, mental health and/or substance use challenges. This includes young people with neurobiological differences as well as those diagnosed with a serious emotional disorder or substance abuse disorder. Family Support Specialists have experience navigating child-serving systems and received specialized training to empower other families who are raising children with similar experiences. The Family Peer Support Worker uses a strengths-based and culturally sensitive approach that recognizes individual youth and family identity, cultural history, life experiences, beliefs, and preferences. CYFD began training Family Peer Support Workers, Supervisors and Trainers in spring 2018. CYFD developed Family Peer Support Worker</p>
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		<p>Certification through the New Mexico Credentialing Board of Behavioral Health Professionals. The first FPWS exam occurred in June 2018.</p>
<p><u>Activity 2</u>: Provide trainings that support staff participation in Wraparound statewide: NM CARES Decision Making, Youth Engagement and Family Engagement</p>	<p>6/30/2017</p>	<p>Completed. NM CARES Decision Making: BHS provided a NM CARES Decision Making training face-to-face at each PSD field office statewide in SFY'17. This teaming model teaches participants to seek to understand the unique culture of each family and respect who they are individually. It is the families themselves that lead us to understand and their voice is paramount and choice in their treatment is heard and taken under advisement.</p> <p>Participants in the NM CARES Decision Making process learned:</p> <ul style="list-style-type: none"> ● The necessary skills and behaviors that effectively engage other team members ● His/her strengths as a facilitator and opportunities to improve skills ● Strategies, skills and behaviors needed to effectively engage youth and families ● Effective facilitation skills to use with teams ● Tools and strategies to use when facilitating a meeting or participating in a meeting <p>In addition to the training, BHS also provides technical assistance to PSD staff, including co-facilitating team decision making meetings with PSD staff as needed. A laminated tool kit was distributed to each PSD staff that described specific steps in how to run a NM CARES Decision Making meeting.</p> <p>In last quarter of SFY'18, BHS met with PSD and the Professional Development Bureau, taking lessons learned from the initial NM CARES Decision Making training to explore development of a teaming training for PSD supervisors. BHS will continue to collaborate with PSD and the Professional Development Bureau to implement this training in SFY'19.</p> <p>High-Fidelity Wraparound 101: BHS provided Wraparound 101 training to PSD staff statewide. The Wraparound 101 training is designed to introduce the Wraparound process. It explains</p>

		<p>Wraparound in the context of our current service array and provides outcomes data. It then proceeds to define Wraparound and breakdown its philosophy as connected to its theory of change and Wraparound practice as connected to its core elements.</p> <p>Youth Engagement Training (YET): BHS developed a Youth Engagement Training (YET) curriculum developed by youth to enable them to train adults, professionals and other community members to start the conversation on strategic planning around youth engagement efforts. In order to successfully build youth-driven teams, the adults are taught key concepts regarding how to empower youth to advocate, recruit, and support each other as peers and equal partners. This curriculum is facilitated by an adult partner and youth who has lived experience navigating children's systems (PSD, JJS, behavioral health, special education, etc.). To date BHS has trained over twenty-three Youth Trainers statewide (sixteen of those youth being recruited by PSD Youth Transition Specialist (YTS) staff) and seventeen adult co-trainers (ten of which are PSD YTS staff). YETs were offered at each of the five Days of Learning BHS provided in SFY'17 and at each PS county office statewide annually. YET was offered at the Children's Law Institute in SFY'17 and Foster Parent Appreciation Conferences. At the end of FY 2017, there were 466 PSD staff trained in YET with an additional 100 foster parents, 154 JJS staff, 13 BHS staff, and 206 other child serving partners such as behavioral health providers and school staff. In SFY 18, an additional 108 PSD staff and 85 foster parents were trained in YET. In SFY'19, BHS will continue to provide YET trainings as requested by PSD.</p> <p>Family Engagement Training: BHS developed and provides Family Engagement Training to support staff by giving them information on the five core values (Genuineness, Active Listening, Trust, Respect and Empathy) in order to better their practice and to help engage families to promote better outcomes. In SFY'18 BHS provided Family Engagement Training to 48 JJS staff, 102 county detention staff, and 8 new JJS staff during their Core Training. In SFY'19, BHS will continue to provide Family Engagement trainings as requested by PSD.</p>
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Systemic Factors

Available data and information that demonstrates the current functioning of the state's operational information system that readily identifies the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.

Based on data and input from families, children, and youth; tribes, courts and other partners; the state must include in the 2020-2024 CFSP a brief assessment on the progress to date to achieve or maintain substantial conformity with this systemic factor.

Provide a brief description of any current or planned activities targeted at improving performance or addressing significant areas of concern identified by the assessment and ways to strengthen outcomes, consistent with the agency's vision. If the area of concern is being addressed in the CFSR PIP or in the Goals and/or Objectives in 2020- 2024 CFSP (section D3) indicate where to avoid duplication

PSD is committed to maintaining a collaborative and cooperative child welfare system that is responsive to the needs of the clients and community in a professional and timely manner. PSD utilizes feedback from quality assurance reviews, constituents, and stakeholders in this effort.

PSD is committed to a process of continuous quality improvement through training, case review, data analysis, and employee evaluation to create a culture of accountability that aligns our behaviors with our child welfare practice model values and principles. This commitment is furthered by making efforts to be in conformity with the seven systemic factors identified in the CFSR. Systemic factors strengths and challenges were identified and developed in various stakeholder meetings and feedback was utilized in the development of the Plan for Improvement.

Statewide Information System

The statewide information system is functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child is who is (or within the immediately preceding 12 months, has been) in foster care.

The current administration has made changes in going forward in CCWIS planning. CYFD has established an Enablement Team for the Comprehensive Child Welfare Information System (CCWIS) project. CYFD hired a full time CCWIS project manager to oversee the project and has established bi-weekly enablement team meetings. The enablement team includes representatives from the Protective Services Division, the Information and Technology Division, the Administrative Support Division, and the Office of the Secretary. CYFD is working with the Human Services Department to ensure that the data is bi-directional and with the population of clients being shared that both departments will be able to enhance the services provided by

working more closely together. The plan has changed from updating the legacy system to moving to a more agile system with modules developed by outside vendors in order to leverage current technology to update best practice within CYFD. This includes having 3 phases for development of the modules.

CYFD is currently in the process of journey mapping all the business processes of CYFD to ensure that the new CCWIS system will allow us to readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care. Approval to move forward with a pilot project has been given by the ACF.

Phase 1 will include a pilot to the northern part of the state to initially start with a licensing and placement module. Once this has proved efficacy than it will be implemented to the rest of the state. Also, included in phase 1 will be eligibility and payments. Phase 2 will be Intake, Investigations, Legal, Permanency, and Family Finding. Phase 3 will be integrating into systems with the Human Services Department. Over the past year, New Mexico has made the following updates to FACTS to support case management needs and data reporting requirements:

- Updated FACTS Data Extracts to support Results Oriented Management.
- Monthly management report to track worker-parent visits.
- Monthly management report to track key legal timeframes including change of plan and timeliness of motion to TPR.
- 10 year data extract for analysis of safety assessment and risk assessment validation.
- Management report for Fostering Connections.
- Preventing Sex Trafficking data and reporting requirements.
- Modification of childcare placements to prevent potential overpayments.

FACTS is going to be utilized and it will be sharing data with outside modules from different vendors. As modules are stood up from vendors that function will be shut off in FACTS and the historical data will be still be shared and available for reports to be facilitated. FACTS will not have any updates to new programming or new data.

Ongoing IT Projects include:

- Ongoing updates related to the AIP
- Development and data reporting related to the 90-day staffing initiatives
- Development of a data exchange between PSD FACTS and Early Childhood's information system EPICS since we are no longer updating the FACTS program
- Development of payment history related to IV-E claiming

Systemic outcomes, strategies and activities were developed based on the results of the statewide self-assessment and stakeholder meetings held during the CFSR. The PSD Child and Families Services Coordinator and Quality Assurance Manager are currently working on a process

to improve evaluation of the seven systemic factors. Further, these activities are detailed in the most recent CFSR PIP, as articulated below.

Case Review System

Other Case Review Initiatives and PSD Case Review System Strengths

- PSD has ongoing collaboration with the Administrative Office of the Courts (AOC) and judicial partners through participation in the Children's Court Improvement Commission (CCIC). The CCIC reviews barriers to permanency in select judicial districts and those districts implemented strategies to address those barriers. The CCIC is developing a plan to follow up with those judicial districts to see if the strategies were implemented and if they were effective in addressing the barriers to permanency.
- As part of its quality assurance (QA) review, PSD conducts a separate legal review on site every month at which data regarding frequency and timeliness of court hearings, TPR and permanent guardianship proceedings and timeliness of permanency goals are evaluated. The legal review also looks at foster parent notification. The QA team did conduct these separate legal reviews from January 2019-October 2019 and provided the ongoing feedback to the CYFD legal team as well as the Children's Bureau regarding systematic legal issues that may have risen for children in the foster care system and their parents. In November and December 2019 the QA Team assisted the IV-E Unit in completing IV-E reviews to assess legal practices via a different scope and tool.
- PSD conducts 90 Day Staffings for its legal cases using the CAP Framework model. These 90 Day Staffings streamline cases and keep them on track throughout the life of a legal case. 90 Day Staffings were implemented to address the concern of timeliness of permanency for children.
- PSD continues to conduct Family Centered Meetings (FCMs) when appropriate at critical decision points such as decisions on whether to file a legal case, changes of placement for children in foster care, consideration of a change in a child's permanency plan, consideration of a trial home visit or discharge from custody.
- In accordance with the New Mexico Children's Code, cases are reviewed by the district court at least every six months for permanency.
- New Mexico has developed a legal form bank and timely updates forms to be utilized across the state to ensure compliance with the state and federal law.
- PSD is implementing Safety Organized Practice (SOP), which includes actively involving parents in the development and review of case plans.

Case Review System Challenges

- Feedback gathered from stakeholder groups (foster parents, courts, CCA's, etc.) have expressed notice of hearings to crucial case members is an issue. In order to address this concern, PSD will develop strategies to ensure notice of hearings are being given to foster parents and that foster parents are given the opportunity to participate in court hearings.
- The judicial system in New Mexico struggles with providing proceedings that consistently provide permanency, including PSD Children's Court Attorneys in areas with high caseloads and vacancy rates not timely filing motions for TPR or permanent guardianship, and courts continuing hearings due to overloaded dockets.
- Through the implementation of Safety Organized Practice, PSD will continue to increase the percentage of cases in which parents are actively involved in the development and review of case plans.
- PSD will develop strategies to timely and consistently address bringing in all parents with constitutional rights early in legal cases and addressing barriers to participation by incarcerated parents.

PSD continues to struggle with meeting Permanency Outcome 1, Items 5 and 6. The largest area of the state, the Albuquerque metro area, has a significant backlog in TPR motions that need to be filed. Albuquerque has filed over 150 TPR motions since October 2018 and hearings on those motions have been scheduled. Albuquerque is working to timely file and prosecute TPR and permanent guardianship motions in newer cases so that a new backlog is not created. Addressing the backlog will reduce caseloads which in turn will assist in improving permanency outcomes. PSD and its judicial partners with the AOC have worked to address barriers to permanency in other areas of the state. In the SW Region, meetings were held with the Children's Court Judge to address barriers to permanency, particularly in reunification cases.

Quality Assurance System

Currently, the quality assurance system is functioning statewide to ensure that it is (1) operating in the jurisdictions with the services included in the CFSP are provided; (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety and ensure that families engaged in In-Home Services were provided with quality services); (3) identified strengths and needs of the service delivery system; and (4) provides relevant reports to the county staff and contractors working with children in foster care and families engaged in or participating in n-home Services.

CYFD's Quality Assurance (QA) Unit conducts monthly reviews in a different county each month as the primary component of the QA process. The reviews include the CFSR case review, a review of legal files, and a review of foster care provider records. The structure of the review process has not changed significantly over the past year. In 2019 the legal and placement reviews occurred for a majority of the year, however, in order to prepare for the IV-E review that is set to

occur in 2020 the QA team and IV-E Specialists teamed up and started to complete IV-E reviews since October 2019. The results of these reviews have been shared with Legal and Placement Staff as well as all county staff during the QA review week.

The goal of the QA Process is to support the agency's mission to improve the quality of life for children by supporting staff and stakeholders through a framework of Continuous Quality Improvement. Implementation of this framework is premised on the value that CQI requires active participation from everyone in the agency, as well as our stakeholders and partners, and that CQI thrives in a culture that supports continuous learning. Following is some of the strategies implemented to support this goal.

Throughout 2019, the QA team continued to provide ongoing consultation to counties through the Quality Assurance Loop-Around (QALA) following each QA review. The purpose of this process was to support counties in implementing PIP strategies and promoting data driven and results oriented practice. There were several counties that utilized this to include San Miguel, San Juan and Chaves counties. These counties reported that the time spent was beneficial for both their new staff and more seasoned staff to stay on top of CFSR outcomes. QA specialists continue to be assigned as a liaison to each region and have continued to reach out to county offices monthly to provide or arrange for support and training related to understanding data, utilizing ROM, understanding the CFSR Outcomes and PIP strategies, and best practice. The responsibility for developing and monitoring county improvement plans has continued to be the responsibility of county and regional management.

In 2020-24, The QA Manager will continue to have oversight over the QALA consultations to ensure that each county office has the opportunity for quality consultations and can provide ongoing support to the COM and Regional to create and implement their CQI County Improvement Plan (CIP). The CIP will include a measurement plan to evaluate outcomes and report progress. The Research, Assessment and Data (RAD) Bureau will be available for support through provision of technical assistance.

In 2019 the Children's Bureau provided CYFD the opportunity to have 6 more rolling periods, in an effort to exit our PIP. Because of this opportunity, the QA team had to conduct reviews of the PIP sites as scheduled, April 2019-September 2019 and then extended these sites to be reviewed again from October 2019 to March 2020. Due to the PIP sites being reviewed again, the QA team devised a strategy to still review the non-PIP site counties that had already been on the schedule for these months. These reviews were abbreviated; however, the counties were able to participate in the entire review process.

In order to assure compliance with CIP, Regional Manager and County Office Manager evaluations have been updated to include alignment of primary job assignments with CFSR outcomes, key child welfare outcomes, and implementation of CYFD practice initiatives. Manager evaluations include minimum benchmarks for identified outcomes:

Performance Measure	Standard for Achievement
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Visits to each county office	At least Monthly
Monthly caseworker visits with all parents with a reunification plan in their place of residence	55%
Children with a reunification plan are returned home timely	40.5%
Children in care will be placed with safe and stable relatives	30%
Investigations will be completed timely	70%
Children will be safe from repeat Maltreatment	92%
Children with an adoption plan will achieve permanency timely	60%
All staff will receive a minimum of monthly individual supervision to address employee development	80%
Each county office will develop and implement a FC Recruitment and Retention Plan, including individualized retention goals	Individualized
All foster care applicants are licensed within 120 days of inquiry	95%
Each county office will develop and implement a worker moral and retention plan	Turnover Rate of less than 25% per year
Managers will attend all QA Review activities and develop and implement post review office improvement plans that address specific findings (QALA Plan)	Individualized
Managers will ensure adherence to CYFD policy and procedure and practice standards through training, coaching, and data review.	As required by CYFD Training Plan and determined through individualized assessment.
Managers will ensure timely and responsive customer service to families, foster parents, providers, and other stakeholders.	Review of payment data, constituent complaint data, and stakeholder feedback.

The Field Deputy Director's will review data measures monthly with Regional Managers and the resulting performance plans to monitor progress and provide support around program improvement. The Regional Managers will review data measures with the County Office Managers and ensure program improvement plans are developed and implemented based on the specific performance outcomes identified through data review and CFSR reviews. Achievement of these standards will influence the individual manager's annual evaluation rating (Does Not Achieve Performance Standard, Achieves Performance Standard, Exceeds Performance Standard, and Exemplary).

Additional Practices and Strategies to be implemented in 2020-24 include:

Improved Information Sharing:

- **Open Meetings:** In an effort to promote CQI and the transparency of the review process, the QA Team has opened all review related meetings to county management, supervisors, and staff. County staff are invited to attend and participate in the planning meetings for the case staffings during review week, debriefings, the QA roll-up meeting, the exit conference, and the post review meeting with the second level consultant reviewer. The placement and legal reviews are also open meetings. County staff have provided positive feedback about this change to process and have identified these meetings as important learning opportunities for staff.
- **Timely Reports:** The QA Team has committed to sending finalized reports to the county within six weeks of the review. This has been mostly achieved since transitioning to the OMS for the review process. The county is provided with the data from each review as well as the individual review instruments.

Improved Collaboration with both internal and external stakeholders:

- Two QA liaisons have been assigned to each county to support the county office in CQI activities before, during, and after the QA review. Liaisons assist the county in interpreting review results, identifying strengths and challenges, and developing strategies. QA Team members have also been assigned as liaisons for Legal, Placement, and Statewide Central Intake. The Legal and SCI liaisons meet with those programs monthly after the review to discuss the review results as they relate to those program areas.
- The county STEP participants are invited and encouraged to attend all QA activities.
- Contract providers and contract managers are invited to attend QA meetings involving cases where services are provided through a contractor.
- The CFSR Coordinator facilitates a stakeholder meeting concerning the systemic factors on the first day of the monthly review.

Improved CQI Training and Outreach:

- **Improved Peer Reviewer Training:** The QA team convenes bi-monthly peer reviewer trainings to prepare agency staff, contractors, and Tribal partners to participate as peer reviewers. This is a comprehensive training that prepares participants to understand the CFSR outcomes and participate as a peer reviewer. To date nearly 200 participants have completed the training.
- **Best Practice and the CFSR Discussion Group:** This is a 2-4 hour discussion/training that the QA Team provides at the request of management or staff in a county office. The goal of this training is to provide an overview of the CFSR Outcomes and how to support

improved outcomes through implementation of PIP strategies and best practice. Over the past year five county offices have been visited.

- Outreach to the County: Prior to each review, the QA Team hosts a one hour session with the review county to provide an overview of the review process and the CFSR Outcomes.
- Legal Review and Foster Care Provider Review Training: Each month the QA Team hosts a monthly webinar to discuss the legal review instrument and the foster care provider review instrument.
- CQI and Placement Meeting: At least quarterly, the QA Team hosts a statewide webinar with placement staff from around the state to discuss pertinent topics including CQI, targeted recruitment, the role of placement navigators, and full disclosure. At each meeting there is presentation of data to frame the discussion. There have been five meetings so far.
- Workgroups: The QA team members attend or facilitate various workgroups on numerous topics including ICWA, Safety Assessment and Planning, Supervision, Investigations, and SCI.
- The Post-Review CQI Plan/Quality Assurance Loop-Around (QALA): Following each Quality Assurance (QA) review, the QA manager will work with county managers to create a CQI team that will oversee the development and implementation of a county based program improvement plan (CIP) that directly correlates with the State Program Improvement Plan (PIP). The purpose of CYFD's Program Improvement Plans is to promote data-driven and results-oriented practice within the context of continuous quality improvement to improve child safety, permanency, and well-being.

The QA data and the CFSR review data, as well as the information gathered during the legal and foster care provider reviews, were utilized to inform the PIP strategies specifically related to the safety, permanency, and well-being outcomes. These PIP strategies include:

1. Pre-Initiation Staffing
2. Ongoing training on safety assessment and management and review of the instrument , how it is used and revisions as necessary
3. Improved quality and quantity supervision
4. The "warm handoff" to services providers
5. Caseworker visitation with parents where they live at least monthly

Staff & Provider Training

Currently, PSD has a training and staff development program that supports the goals and objectives of the Child and Family Service Plan (CFSP). The program includes the training for new employees, New Employee Training (NET) and advanced training and professional development

from multiple sources internal and external to CYFD. Trainings are designed to support safety, permanency and well-being for children, as well as PSD's CFSP Plan for Improvement goals.

The CYFD Academy for Professional Development and Training (APDT) is the initial training for the CYFD agency offering a blended learning environment, of e-learning, class instruction and experiential learning. They are tasked with developing the competency and ability of employees to perform well on the job. In January 2020, a new training curriculum was launched for new employees, now called New Employee Training (NET). The training emphasizes 7 foundational areas of knowledge for entry level workers: Cultural Humility, Child Welfare History and Values, Engagement, Interviewing, Assessment, Ethics, and Organization. Employees complete 3 weeks of classroom and experiential training and 2 weeks of on the job training. After completion, employees are provided with a training plan for how they will develop ongoing training to build their understanding of child welfare best practices for safety, permanency and well-being over the following 6 months. Included in the Workforce Development Division, PSD has regionally-based coaches to assist in the building of skills and knowledge for PSD field workers, supervisors, managers, and support staff. This program is tasked with ensuring a highly competent workforce equipped to carry out the mission of the agency and to meet the safety, permanency and well-being outcomes of the CFSP. The six regionally based trainer coaches (RBTC) staff to provide ongoing skills development and address specific needs based on supervisor recommendations.

In order to achieve positive outcomes for New Mexico children and families the APDT and the Training and Coaching program work together to meet the need for skills-based, hands on learning for both workers and supervisors. They are complimentary programs that provide multiple paths for employees to gain knowledge and skills to be effective child welfare workers.

Initial Staff Training

The training system is functioning as an effective statewide activity for initial training to all staff who deliver services pursuant to the CFSP that includes the basic skills and knowledge required for their positions.

The Academy of Professional Development and Training (APDT) provides initial training to all PSD employees via the New Employee Training (NET) curriculum. New hires are required to take a mandatory five-week NET upon hire with the agency.

NET is designed for the new hire to receive fundamental skills and knowledge needed to achieve safety, healing, permanency, and wellbeing for all New Mexico children. In NET, employees learn through e-learning, classroom training, experiential learning and on-the-job training. The NET is module based, so that employees who do not meet the baseline of knowledge can return to take modules where they need support. Modules included are:

- Child Welfare Values and Laws
- Protective Services Best Practices
- Cultural Humility
- Safety Organized Practice and Structured Decision Making

- Ethics
- Motivational Interviewing
- Documentation
- Emotional Intelligence
- Overview of Mental Health, Domestic Violence and Substance Abuse and Connection with Child Welfare
- Family Engagement
- Adolescent Engagement
- Child Maltreatment
- Genograms
- Trauma and Trauma Informed Practice
- Managing a Caseload
- Protective Services Legal 101

The Coaching program regionally based coaches' work with new employees to increase the retention and implementation of the knowledge and skills they receive in NET. The Coach works with the employee during on-the-job training week, they are an accessible way for the new employee to ask questions, practice newly developed skills and develop strong practices prior to working independently on caseloads.

On-going Staff Training

The training system effectively ensures functioning statewide ongoing training that addresses the skills and knowledge needed to carry out duties with regard to the services included in the CFSP. Ongoing training is provided by APDT, Coaching program, or external nationally recognized and local expert consultants. Training needs for PSD as a whole are determined by the division leadership, which aligns with progress on the safety, permanency and well-being outcomes. Supervisors can also determine additional training needed for their team or a particular employee. There are over 70 trainings available in the curriculum catalog to staff either online or in the classroom.

The Coaching program works with employees from a self-reflective model to identify areas of improvement. Employees can self-refer to the Coach if they feel they are having difficulty with a certain area or if they want to work on building their skill with a specific tool. A supervisor can also refer an employee to the Coaching program if they have assessed a need for additional learning support. Coaches increase the ability of the employee to be able to provide support to families, foster families and children/youth improving outcomes and interactions with the PSD.

Part of the ongoing training is to work with Supervisors to help them gain the skills in leadership and management for increased professional development and retention of their workers. Newly hired supervisors are required to take the APDT Foundations of Leadership training and HR supervision. Foundations of Leadership (FOL) is a 10-hour, intermediate training program that introduces skills and provides practice on key issues supervisors face. The skills taught include: Boundaries and Limit Setting, Leadership, Conflict Management, Self-care, Communication and Negotiation. This course presents beginning to intermediate level skills that managers need to

lead their team effectively. For Human Resource courses on Managing Employee Performance (MEP, "employee evaluations"), union, and discipline, new supervisors take the HR supervision course provided by the New Mexico State Personnel Office (SPO).

The Coaches also coach and train supervisors. The RBTC's coaching the supervisors in a way that models and builds skills for supervisors to utilize with their staff. The Coaching program can offer through their various methods the opportunity for supervisor to build their supervision skills and/or learn how to build a more efficient and effective team.

Additional Trainings Offered to Staff:

- Family Engagement Training: Behavioral Health Services (BHS) Division of CYFD provides Family Engagement Training to support staff across CYFD. This training includes information on five core values: Genuineness, Active Listening, Trust, Respect and Empathy. Engagement training guides field workers in their own practice and helps them to better engage families to promote better family wellbeing outcomes. In State Fiscal Year 2018, BHS provided Family Engagement Training to 48 JJS staff, 102 county detention staff, and 8 new JJS staff during their Core Training. In State Fiscal Year 2019, BHS will continue to provide Family Engagement trainings as requested by PSD.
- High-Fidelity Wraparound 101: BHS also provides Wraparound 101 training to PSD staff statewide. The Wraparound 101 training introduces the Wraparound process and explains Wraparound in the context of our current service array and provides outcome data.
- NM CARES Decision Making: This teaming model created by BHS that guides field staff to seek to understand the unique culture of each family they serve and respect each family's individuality. Field workers in the NM CARES Decision Making process learn:
 - necessary skills and behaviors that effectively engage other team members;
 - their own strengths as a facilitator and opportunities to improve skills;
 - strategies, skills and behaviors needed to effectively engage youth and families;
 - effective facilitation skills to use with teams; and
 - tools and strategies to use when facilitating a meeting or participating in a meeting.

In addition to the training, BHS also provides technical assistance to PSD staff, including co-facilitating team decision making meetings with PSD staff as needed. A laminated tool kit was distributed to each PSD staff that described specific steps in how to run a NM CARES Decision Making meeting.

- Youth Sex Trafficking (YST): YST was developed between PSD and BHS and rolled out to all PSD staff during the summer of 2018. YST is designed for child welfare professionals to build their capacity to identify, report and serve survivors of child sex trafficking. This training provides child welfare professionals with knowledge and skills that support

effective implementation of Preventing Sex Trafficking and Strengthening Families Act, Public Law (P.L). 113–183.

- Safety Organized Practice: The term “safety-organized practice” (SOP) was first used by Andrew Turnell to describe an approach to day-to-day child welfare casework. The practice is designed to help all key stakeholders involved with a child—i.e. parents, extended family, child welfare workers, supervisors and managers, lawyers, judges, other court officials, and even the child themselves. SOP helps workers to keep a clear focus on assessing and enhancing child safety at all points in the case process. This adapted approach integrates a strengths-and solution-focused child welfare practice approach with the Structured Decision Making® (SDM) system (a set of research-based decision-support assessments) to create a rigorous child welfare practice model. This training was given by both NCCD staff and selected T4T staff and trained out Regionally/Statewide.
- Structured Decision Making: This is a two-day Staff Training for the implementation of the New Mexico CYFD Structured Decision Making® (SDM) safety and risk assessments will provide participants an opportunity to increase their skill and consistency in using the tools and in partnering them with related tools and practices to inform and support key decisions during Assessments for decision making points in the life of a case. This training was given by both NCCD staff and selected T4T staff and trained out statewide.
- Structured Decision Making for Supervisors: This is a two-day staff training on the implementation of the New Mexico CYFD Structured Decision Making® (SDM) safety and risk assessments. This training provides field staff an opportunity to increase their safety assessment skills and provides training in using the developed instruments. An additional day was added for Supervisors on how to guide workers, facilitate discussions around the tools and how to incorporate in Supervision. This training was given by NCCD staff statewide.
- Placement 101: provides an overview of the Foster Parent Licensing Process, Criminal Records Check (CRC), ICPC, Foster Care Maintenance/Support, Adoption Process/Support and Guardianship Program.
- Smart Random Moment Sampling (RMS) Training: The purpose of the training is to demonstrate the enhanced RMS system called SmartRMS. Federal regulations require states carefully determine shared administrative costs for each program. The purpose of the Random Moment Sample (RMS) is to identify the breakdown of staff time for claiming federal funds. The total of all RMS observations determine the percentage of funds charged to each federal and state program for administrative costs, such as, staff salaries and benefits each quarter. The state is required to maintain a minimum number of valid samples, therefore, answering within the two business day timeframe is required. Supervisors complete a 10% sample validation and should respond for employees on leave in order to maintain valid samples.

- Behavioral Health Services Trainings: CYFD Behavioral Health Services (BHS), in collaboration with PSD, is committed to the provision of quality behavioral health services and supports that are trauma informed, evidence-based, culturally competent, and youth and family driven that meet the needs of CYFD's children, youth and families. To meet this goal, BHS collaborates with PSD to provide trainings to PSD staff, partner agencies, family members, youth, and community behavioral partners serving the PSD population.

Staff Training and the Next Five Years

In FY 2020, CYFD has begun the overhaul of its training program. Under our new administration we have developed a focus on workforce development, utilizing best practices for recruitment, retention and training of new and existing employees. In this change, the APDT and Coaching program have been merged under the Workforce development Division.

Additional changes to come are based on the assessment of CYFD training practices and agency effectiveness. Using recognized national standards, promising and innovative practices from other states as a guide, the assessment is reviewing the structure, implementation models, curricula, employee and leadership satisfaction to determine key strengths and areas for improvement of the training and professional development.

Planned changes in 2020-2024 include:

- a 5-level evaluation model that extends beyond the Kirkpatrick Learning Evaluation method to better assess employee gains and retention of skills;
- curricula to increase practical skills application;
- curricula to link presentations, experiential learning and facilitation to desired outcomes and competencies;
- critique and coaching methods of employees for an increased feedback loop with direct supervisors;
- catalog of training available to meet professional development needs;
- Advisory Council for training to increase meaningful contribution to curricula and catalog development from agency leadership and worker input; and
- curricula format to increase meaningful participation of marginalized populations, such as Native Americans, youth, LGBTQ, homeless and incarcerated.

This assessment will also look closely at other training programs within PSD that are not for employees to include review of the foster parent training, prevention programs and training of community stakeholders. Recommendations will be made that are geared toward increasing the recruitment and retention of foster parents, mitigating the need for out of home placement and/or higher level of care, and improving collaboration with community stakeholders.

One of PSD's training limitations includes training outcome data. There is not a current modality for collecting training data, however, data collection on training outcomes for staff and providers will be implemented over the next five years. Development of training effectiveness is currently

being evaluated by the Office of the Secretary and the Research and Development Bureau. The RAD Bureau has partnered with the training academy and the Office of the Secretary to implement a data collection strategy on training attendance and effectiveness of trainings offered by PSD, BHS and through the Regionally Based Trainer Coaches. One strategy to implement data collection immediately is the development of surveys prior to trainings and provided post trainings to all attendees to measure training outcomes and coaching effectiveness. Following each training, a coaching plan created by the RBTC's will be implemented to assist field workers and supervisors in developing the skills learned in each training. This will be measured against the CFSR Federal Data Indicators to assess for impact. This will be incorporated into quarterly stakeholder meetings where PSD can elicit feedback and make steering decisions as necessary.

Service Array & Resource Development

The service array and resource development system is functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the CFSP: (1) Services that assess the strengths and needs of children and families and determine other service needs; (2) Services that address the needs of families in addition to individual children in order to create a safe home environment; (3) Services that enable children to remain safely with their parents when reasonable; and (4) Services that help children in foster and adoptive placements achieve permanency. The service array and resource development system is also functioning statewide to ensure that the services in Item 29 can be individualized to meet the unique needs of children and families served by the agency.

Family Support Services

Family Support Services (FSS) continue to be provided to families by contractors in Chaves, Dona Ana, Los Alamos, Rio Arriba, San Juan, Santa Fe, and Taos counties to prevent child maltreatment and prevent reoccurring child maltreatment. FSS provides intensive home-based, short term (60 days) case management to families in order to link families with appropriate services and provide one-on-one evidence-based parenting. Service providers are allowed to extend services up to 90 days with supervisor approval if appropriate to address safety concerns. Currently, in order to be eligible for services, the child must be residing with their primary caregiver at the time of the referral, and must maintain residence there throughout the provision of FSS services. Only Protective Services staff can make referrals to this program.

Family preservation services continue to be offered in Dona Ana, Grant, Southern Catron, Lea and Valencia Counties. Families are eligible regardless of income. Referrals are made by Protective Services staff when the child is unsafe and there is a moderate to high-risk for maltreatment. Families whose children are in the legal custody of PSD are ineligible for referral.

Families referred to contractors by PSD receive family preservation support every week for up to six months in the following areas:

- Safety planning

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

CYFD PSD continues to provide Family Support Services (FSS) through contracts with local, community based providers. FSS is one of the services included in the Community Based Prevention, Intervention and Reunification (CBPIR) contracts and is available in the following 25 counties: Chaves, Colfax, Union, Dona Ana, Luna, Sierra, Otero, Lea, Hidalgo, So. Catron, Grant, Quay, Harding, Santa Fe, Rio Arriba, Taos, Sandoval, Valencia, No. Catron, Socorro, McKinley, San Juan, Torrance, Cibola and Eddy. Secondary prevention Family Support Services provide families who have children ages birth to 5 years of age that do not have an open CYFD PSD investigation unless the child has a CARA Plan of Safe Care created at the time of birth by hospital medical personnel due to prenatal substance exposure. Eligible families can receive these services for up to 6 months with the possibility of an extension for up to 3 months with CYFD Program Manager's approval. The CBPIR contracts also include placement prevention Family Support Services which is a short term program that works with families, including relative and non-relative foster and adoptive families, in their homes to help them meet the basic needs of their children and prevent child maltreatment. Families can have substantiated or unsubstantiated cases of child abuse or neglect and are in need of support and case management services in order to prevent child maltreatment. Referrals can be made by CYFD Protective Services, Juvenile Justice Services, CYFD funded Home Visiting Level II programs, licensed childcare facilities, and New Mexico Prekindergarten providers. Other referral sources must be approved by CYFD; however, priority must be given to families who are referred to the service by CYFD Protective Services. Families can receive the service for up to six months and can discharge as soon as they successfully complete their Family Plan.

High-Fidelity Wraparound:

In 2019, CYFD-BHS received two SAMHSA grants who have as a key deliverable the expansion of wraparound to a total of five counties.

The first grant is the Healthy Transition Expansion Project aimed to specifically work with transition age youth (16-25 years old). Transition age youth typically tend to phase out formal supports which can lead to leave them without supports during an important age in their lives. The criteria for enrollment with this funding source is Ages 14-25; and SED/SMI diagnosis; and Involvement in multiple systems including: child welfare, juvenile justice services, BH services, special education, adult protective services, (For those over 18 years of age involvement can be historical); and functional Impairment in at least one of the following domains: education, vocation, social, housing, legal, and/or intellectual and developmental disability. Through this grant, Wraparound was expanded to San Juan County and to a second provider in Bernalillo County.

The second grant is the Systems of Care (SOC) III grant. This is the third SOC SAMHSA grant CYFD-BHS has received where Wraparound expansion has been a key deliverable. This is evidence that the NM Wraparound CARES model is being effective and delivering outcomes. Through this grant, we are introducing key service array services that include Mobile Crisis Response, Respite, Family Peer Support, and Wraparound. The criteria for enrollment to this grant is: Ages: 4-21; SED/SMI diagnosis; current or historic multi-systemic involvement (child welfare/juvenile justice services, special education, and/or BH services); and Functional impairment in: education, vocation, social, housing, legal, and/or intellectual and developmental disability. Through this grant, Wraparound expanded to Chavez, Sandoval and Valencia counties.

In 2010, NM Wraparound CARES introduced a coaching endorsement track with the intent to provide sustainability options to providers. Through this track, providers can petition to have their Wraparound supervisors be trained to become endorsed Wraparound coaches to substitute the coaches/coaching provided by NM Wraparound staff. Having internal coaches ensures sustainability from the part of the providers. To date we have seven (7) endorsed coaches.

Finally, in late 2019, CYFD-BHS hired an additional Wraparound Coordinator. Adding this staff member was instrumental in being able to confidently expand wraparound as it addressed capacity needs.

Family Peer Support Workers are primary caregivers who have ‘lived experience’ of being actively involved in raising a child who experiences emotional, behavioral, mental health and/or substance use challenges. This includes young people with neurobiological differences as well as those diagnosed with a serious emotional disorder or substance abuse disorder. Family Support Specialists have experience navigating child-serving systems and received specialized training to empower other families who are raising children with similar experiences. The Family Peer Support Worker uses a strengths-based and culturally sensitive approach that recognizes

individual youth and family identity, cultural history, life experiences, beliefs, and preferences. CYFD began training Family Peer Support Workers, Supervisors and Trainers in spring 2018. CYFD developed Family Peer Support Worker Certification through the New Mexico Credentialing Board of Behavioral Health Professionals. The first FPWS exam occurred in June 2018.

Through the initial Healthy Transition Expansion Project, CYFD BHS expanded Wraparound to San Juan County and to a second community based provider in Bernalillo County. In an effort to increase capacity, expand the service and ensure sustainability of Wraparound in New Mexico, seven Wraparound Supervisors have become endorsed coaches and CYFD BHS hired another Wraparound Coordinator. In addition, through the Systems of Care III grant, CYFD BHS is expanding services which include Wraparound as well as Mobile Crisis Response, Family Peer Support and Respite. Wraparound will be expanded to Chaves, Sandoval and Valencia counties through the SOC III grant.

Adolescent Substance Use Reduction Effort (ASURE):

Through the Adolescent Substance Use Reduction Effort (ASURE), CYFD BHS continues to serve the state's transition age youth who are using or are at risk of using alcohol and/or other substances. The ASURE programs focus on decreasing the overall use of substances within this particular age population as well as supporting transition age youth who are faced with a co-occurring disorder. One of the services funded through ASURE is the Youth Support Services (YSS) Life Skills Coach trainings such as the ASURE programs assessment tools and Motivational Interviewing Skills.

New Mexico currently has eight YSS Life Skills Coaches and six YSS Life Skills Coach Supervisors which are located across the state through community based partners in Bernalillo, Taos, San Juan and Lea counties.

The Adolescent Substance Use Reduction Effort (ASURE) is a group of programs administered by CYFD-BHS that serve New Mexico's transition age youth who are using or are at risk of using substances and/or alcohol. The focus of these programs is on decreasing the overall use of substances among young adults, and supporting youth struggling with co-occurring disorders. ASURE includes a full service array such as intensive outpatient treatment programs (IOPs), Evidence Based Practice (EBP) trainings for youth-focused behavioral health providers, and paraprofessional youth support. The intervention models developed and/or adopted under the umbrella of ASURE are strengths-based and youth centered.

ASURE supports family permanency by providing additional resources and assistance to young adults who for any reason are unable to draw upon their current family or communities for sufficient support. This is implemented through life skills coaching, mentoring, and alternative programing. This includes the Youth Support Services (YSS). YSS is a para-professional service model predicated on the belief that youth who engage in long-term, healthy relationships and learn appropriate life skills develop pro-social behaviors including self-efficacy, motivation, and collaborative engagement.

Historically ASURE has sponsored trainings across the state in Seeking Safety trauma care, the Seven Challenges, the Community Reinforcement and Family Training (CRAFT), Motivational Interviewing, use of the Global Appraisal of Individual Needs Short Screener (GAIN-SS), the American Society of Addiction Medicine (ASAM) assessment and placement criteria, and Youth Support Services (YSS) transformative life skills coaching. ASURE continues to fund YSS Life Skills Coach (LSC) trainings for paraprofessionals. This is a trauma- and culturally- informed curriculum that includes Motivational Interviewing (MI) skills, elements of the A-CRA, as well as trainings specific to the assessments utilized for the ASURE programs.

Presently, there are eight YSS-LSC trained coaches and six YSS-LSC trained supervisors in seven agencies across the state of New Mexico including Bernalillo County, Farmington, Hobbs, and Taos. ASURE also collaborated with Youth Move National to assess the extent to which YSS-LSC affiliated agencies incorporate youth voice into agency-level procedures and decision-making processes. ASURE continues to provide ongoing support and resources to these agencies, assisting them in increasing youth participation across all facets of program and policy development, both inside the agency and in their respective communities. Over the course of this grant year, ASURE-TI has worked to sustain and reinforce, its current providers' capacity to serve its youth by providing both virtual and on site assistance to each agency, maintaining monthly statewide YSS meetings, and providing ongoing trainings to YSS coaches and supervisors. This amalgamation of services ensures fidelity to the YSS program, identifies programmatic and/or technical challenges and/or concerns at the source, and facilitates a network of support among fellow YSS coaches and supervisors.

Infant Mental Health:

CYFD BHS contracts with local community based providers to provide infant mental health services. The services available vary depending on the community served but may include an Infant Mental Health Team, Parent Infant Psychotherapy and the Foster Parent Program. Infant Mental Health Teams focus on the dyadic relationship between the infant and the parent using Child Parent Psychotherapy. Parent Infant Psychotherapy focuses on the dyadic relationship between the infant and the infant's primary caregiver using Child Parent Psychotherapy. The Foster Parent Program focuses on supporting the infant's foster parent(s) by helping the foster parent(s) to understand and meet the infant's needs. The clinician working with the infant and the foster parent(s) is also available to make recommendations to CYFD PSD and the Children's Court regarding the best interest of the infant.

The goal of the Infant Mental Health Team (IMHT) is to provide infants, birth-to-three in PSD custody, with a coordinated process for assessment and treatment in order to promote permanency planning and positive developmental outcomes. BHS' Infant Mental Health Team (IMHT) target population is infants, ages 0-4 years, who are in foster care due to abuse or neglect. Services include comprehensive infant mental health assessments to help identify strategies and interventions to repair attachment-related regulatory and developmental challenges thorough Child Parent Psychotherapy, an evidenced base trauma informed clinical protocol. Infant Mental Health is also developmentally informed. The IMHT strives to develop positive, productive working collaborations between Protective Services, infant mental health

specialists, early intervention (Part C) foster parents and the judiciary, so that the entire system is working on behalf of the best interest of the infant. The IMHT has impacted judicial decisions as well as PSD, foster parents, CASA, GAL's and respondent attorneys.

Infant Mental Health has also provided PSD a process of assessment to enable statewide intake as well as PSD Investigators with tools to assess infant's level of risk and safety if and when a referral is made. Furthermore, Infant Mental Health has provided input to PSD incorporating language to standardize procedures for Permanency Planning workers and Infant Mental Health clinical services. Presently the Infant Mental Health Teams are located in eight of New Mexico's Judicial Districts.

In FY20 Behavioral Health Services (BHS) Infant Mental Health (IMH) section contracted with community based providers to deliver all or some of the following IMH CPP services: Team, Parent Infant Psychotherapy (PIP), and Foster Parent Program (FPP). A description of these services is provided below:

- Parent Infant Psychotherapy (PIP) is treatment services which target the dyadic relationship between the Infant and the Primary Caregiver through Child Parent Psychotherapy (CPP).
- Foster Parent Program: The Foster Parent Program services support the Foster Parent's(s') understanding of the Infant's needs, and allows the clinician to have a consistent relationship with the Infant and if needed make recommendations concerning the best interest of the Infant to CYFD Protective Services (PS) and the judicial system.

Team: IMHT services target the dyadic relationship between the Infant and the Parent through Child Parent Psychotherapy (CPP).

Community Behavioral Health Clinicians:

In State Fiscal Year 2018 BHS, through funding from multiple SAMHSA grants, developed a web-based geo-map of children's behavioral health services. The geo-map includes the array of publicly funded behavioral health services (through Medicaid and CYFD State General Funds), PSD contracted services, Juvenile Justice Advisory Committee (JJAC) funded services, and an array of individuals or providers that specifically service the CYFD involved population, as identified by BHS Community Behavioral Health Clinicians (CBHCs). BHS collaborated with PSD Contract Staff to identify and map PSD funded services and contractors. This effort is assisting in identifying service gaps and needs statewide as BHS advocates for a comprehensive service array with its Behavioral Health Collaborative partners, to include the Human Services Department, Public Education Department, and the Department of Health.

PSD continues to work with BHS to address the delays in service array. BHS continues to restructure its internal cadre of Community Behavioral Health Clinicians (CBHCs) to serve a target population of PSD involved children and youth. CBHCs are based in most CYFD county offices statewide and continue to be a resource to all PSD workers BHS and PSD continue to adjust a joint protocol for collaboration with CBHCs that includes guidance on the following:

- Case consultations

- Types of cases for consultation with a CBHC:
 - Homeless youth
 - Consult on Out-of-home placements to include instate RTC, TFC, Group home, Acute Hospital settings
 - Regular foster placement where additional clinical support is needed
- CBHC's collaborate on Crossover Youth and dual involved youth. Participate in the following meetings teaming's, FCMs, or CAP staffing's.
- Out-of-home placement oversight for out of state RTC placements

Provide a brief description of any current or planned activities targeted at improving performance or addressing significant areas of concern identified by the assessment and ways to strengthen outcomes, consistent with the agency's vision. If the area of concern is being addressed in the CFSR PIP or in the Goals and/or Objectives in 2020- 2024 CFSP (section D3) indicate where to avoid duplication.

CYFD BHS Community Behavioral Health Clinicians (CBHCs) continue to serve as a support and resource to PSD. CBHCs and PSD workers collaborate to ensure the needs of youth in particular are appropriately assessed and that those needs are being effectively met. CBHCs and PSD workers participate in case consultations regarding matters such as out of home placements to include regular foster home placements that need clinical support, out of state Residential Treatments Centers and in-state Residential Treatment Centers, Treatment Foster Care, Group Home and acute hospital settings. CBHCs also participate in meetings involving crossover youth such as Family Centered Meetings, CAP staffings and other teaming opportunities.

Activities targeted at improving performance in the service array

Several recent significant changes to New Mexico legislation and policy implementation will be implemented during the time period covered by this CFSP. These are:

- The consolidation of Promoting Safe and Stable Families and CBCAP funded programs into new, regional contracts.
- The implementation of HB376, which creates an Alternative Response program to serve families whose CPS referral does not merit a full investigation, but who could nonetheless benefit from community-based services.
- The implementation of HB230, which transforms planning for substance exposed newborns.
- The implementation of the federal Family First Prevention Services Act, which aims to expand service offerings to parents of candidates for foster care.
- CYFD has also increased its participation in the New Mexico Behavioral Healthcare Collaborative, a group of state-level agencies tasked with creating a single behavioral health care and services delivery system that promotes mental health, emphasizes

prevention, early intervention, resiliency, recovery and rehabilitation, while managing funds efficiently, and ensuring availability of services throughout the state. The Behavioral Health Collaborative has specified building out children's community based mental health services as 1 of 3 immediate priorities.

Consolidating PSSF and CBCAP Programs:

CYFD's Prevention Unit evaluates the effectiveness of our various programs and initiatives to promote safe and stable families. Through data analysis, meeting with stakeholders, including CYFD field staff, community providers, families, and other governmental agencies, we recognized the deficiencies in the program design of the various programs funded under the PSSF and CBCAP grants.

The various PSSF and CBCAP programs were contracted to community based agencies through separate procurement processes. This limited the ability of agencies to be awarded all of the PSSF and CBCAP programs if they were unable to hire appropriate staff to meet each contract's unique staffing requirements. The rural communities in NM have a limited ability to hire qualified staff and meet the expectations of each contract, individually, as each contract requires a certain number of families to be served each year. In addition, high-needs families in New Mexico often need extended support services to maintain stability.

CYFD recognized that family circumstances and needs fluctuate, requiring flexible programming to meet each family's unique needs. By combining the various programs under PSSF and CBCAP into one "mega" contract, CYFD through its contractors will offer a continuum of care and support to families. These services be offered in 24 of New Mexico's 33 Counties: Bernalillo, Catron, Chaves, Cibola, Colfax, De Baca, Dona Ana, Grant, Hidalgo, Lea, Los Alamos, Luna, McKinley, Otero, Quay, Rio Arriba, San Juan, Santa Fe, Sierra, Socorro, Taos, Torrance, Union and Valencia.

The "mega" contracts will enable rural communities the ability to provide comprehensive services to a wider range of families in need of support. The current programs limited the definition of "family" to biological parents or current guardians who had custody of the children when CYFD became involved with the family. New Mexico has a very diverse population, and often, extended family members become the primary caregivers of children. With the "mega" contracts, New Mexico has expanded program eligibility to not only biological parents, but to other family members, fictive kin, or anyone pursuing guardianship and adoption. In addition, foster parents will be eligible to receive services in order to help them meet the high needs of the abused and neglected children in their care. It is hoped that this expansion will help retain qualified foster parents.

CYFD PSD issued contracts to community based agencies throughout the state to provide Community Based Prevention, Intervention, and Reunification (CBPIR) Services to children, youth and their families. These contracts include both CBCAP and PSSF funding and are currently serving 25 of the state's 33 counties. CBPIR providers can serve birth parents, relative and fictive kin caregivers, families pursuing guardianship or adoption, and foster parents. In addition, all

three services within the contracts are driven by a tiered case management model and the providers are required to complete a comprehensive assessment of the family to identify the family's strengths, areas of need and existing connections to resources and supports in order to determine the appropriate tier level for the family to ensure the family receives the necessary level of service provision. CYFD PSD recognizes the important role that the CBPIR contracts have in child maltreatment prevention and as a result, plans to expand the contracts with the intent to have CBPIR contracts in all 33 counties.

HB 376: Alternative/Differential Response:

In 2019, the New Mexico legislature passed HB376, which commits CYFD to implementing an abuse and neglect multi-level response system, beginning in 2021.

The descriptive language of the bill reads:

The department shall establish a multilevel response system to evaluate and provide services to a child family, relatives, caretakers or guardians of a child with respect to whom a report alleging neglect or abuse has been made. The multilevel response system may include an alternative to investigation upon completion of an evaluation that may be completed at intake by the department, the results of which indicate that there is no immediate concern for the child's safety; provided, however, that an investigation shall be conducted for any report: (1) alleging sexual abuse of a child or serious or imminent harm to a child; (2) indicating a child fatality; (3) requiring law enforcement involvement, as identified pursuant to rules promulgated by the department; or (4) requiring a specialized assessment or a traditional investigative approach, as determined pursuant to rules promulgated by the department.

An analysis conducted in the State Senate further detailed the provisions of the bill:

House Bill 376 bill amends existing statute requiring require CYFD to establish a multilevel response system to evaluate and provide services to children and their families or caretakers when a report of child abuse or neglect has been made. The multilevel response system allows CYFD to, after evaluation, include an alternative to investigating the report when the evaluation indicates that there is no immediate concern for the child's safety. The bill defines "family assessment" as a comprehensive, evidence-based assessment tool to determine the needs of a family and the likelihood of imminent danger to a child's well-being, the child becoming an abused or neglected child and the strengths and needs of the child's family members or caretakers. CYFD must investigate reports instead of utilizing the multilevel response system when the report alleges sexual abuse or serious or imminent harm to the child, indicates a child fatality, requires law enforcement involvement or requires a specialized assessment or traditional investigative approach.

- The bill permits CYFD to reassign a case from investigation to the multilevel response system and to proceed with an investigation if the family declines services offered under the multilevel response system.
- The bill requires CYFD to employ licensed social workers to provide services to families participating in the multilevel response system.
- The bill permits to CYFD to pilot the system prior to statewide implementation and to limit implementation to areas of the state where appropriate services are available and operate the system within available state and federal resources.
- The bill requires CYFD to provide an annual report on the system, arrange for independent evaluation of the system, incorporate the system into its quality assurance review process, and develop performance measures.

If CYFD pilots or geographically limits the system, the bill requires CYFD to submit a plan to LFC and the department of finance and administration by July 1, 2021, on how to expand the system statewide. Finally, the bill amends the custody hearing statute (32A-4-18) to include an alternative disposition at the custody hearing of the court returning legal custody to the parent, guardian or custodian and ordering their participation “in programs or services aimed at addressing the underlying causative factors that jeopardize the safety or well-being of the child.”

CYFD PSD remains focused on and committed to supporting children, youth and families through prevention services. CYFD PSD formed a workgroup in the Fall of 2019 which was tasked with developing the multi-level response system. The workgroup includes representatives from Executive Leadership, Statewide Central Intake, PS Prevention Unit, PS Investigators and JJS staff. The workgroup developed a three track differential response system: Track 1 – Community Prevention Response; Track 2 – Collaborative Response; and Track 3 – Traditional Response.

The first phase of the multi-level response system will focus solely on the implementation of the Community Prevention Response track and will be piloted in Sandoval, Valencia and McKinley Counties. This track focuses on providing preventive services to families who were referred to Statewide Central Intake, but the referral was screened out due to not meeting the statutory requirements of child abuse and/or neglect. The families who meet the criteria for the Community Prevention Response track will be referred to the Statewide Central Intake’s Family Resource Connections (FRC) Unit and FRC staff will engage the family, assess the family’s needs and refer the family to the appropriate community provider. CYFD PSD plans to pilot this phase in the three identified counties on July 1, 2020 and a statewide rollout of track one is expected to occur in July 2022. The implementation of this phase is expected to occur over an 18-24 month period and will be followed by an evaluation.

In an effort to prepare for the pilot, community based service providers who are able and willing to serve families in the three pilot counties have been identified and the development of the PSD

FRC Unit is underway. In addition, two other workgroups are meeting in an order to prepare for the pilot. One workgroup is developing an FRC Logic Model and the other workgroup is focused on developing a new SCI SDM tool. Additional preparation efforts include the PSD Prevention Unit working to execute contracts with the community based providers in the three pilot counties, the FRC workgroup is meeting with families to obtain their input and recommendations and the Logic Model workgroup continues its work on important elements such as identifying outputs, short term outcomes and long term outcomes which will be critical to the evaluation of FRC.

HB 230: Plans of Care for Substance-exposed Newborns:

In July 2019, the CARA state law was enacted to ensure healthcare professionals are responsible for assessing for substance at the time of delivery. If the newborn was exposed to a substance (including prescribed, non-prescribed and illicit drugs) at any time during the pregnancy, a plan of care is to be created. New Mexico's approach is based on a preference that infants, mothers, and families can remain together. If, however, the health care professional is concerned for the parent's ability to safely care for the child, a referral should be made to Protective Services for a possible investigation of abuse/neglect. Removal of the child from the parent should only be based on immediate safety concerns that present a danger to the child. If safety concerns can be mitigated, removal can be avoided. For example, if mother and infant are living in a residential treatment center, the safety concerns may be mitigated and the infant may remain with the parent. New mothers should be encouraged to hold and spend time with their infants as well as breastfeed when appropriate. This required a change in New Mexico's children's code to read that substance use in or itself is not considered abuse and/or neglect. This change was necessary as New Mexico's approach is that substance use disorder is a chronic medical condition and should be treated as such. This requires health professionals to assess every family to understand what specific needs the family has to create an individualized plan to meet their needs. Once a plan of care is created, a referral for care coordination is made to the managed care organization who is responsible for monitoring the implementation of the plan of care. In the last year, the CARA workgroup worked with the Office of the Superintendent to ensure families who are insured on the commercial side can receive the same monitoring service. The plans of care are sent to the Department of Health (DOH) and Children, Youth and Families Department (CYFD) for screening, additional monitoring and data collection.

During this last year, the CARA workgroup has trained all of the birthing hospitals in New Mexico. Due to the pandemic, 2 of those hospitals had to be trained via teleconferencing. In addition to these large trainings, the DOH and CYFD Navigators have provided extensive one on one trainings with individuals. In addition to hospital staff trainings, the navigators also offer training opportunities to insurance care coordinators, community service providers, tribal entities, judges/attorneys, CYFD staff, and a number of other entities who have direct contact with these families to ensure individuals understand how CARA works and the unique public health approach New Mexico is taking.

The CARA training consists of discussion regarding the federal and state law, the process of creating a plan of care as well as best practices established by the CARA workgroup. These best

practices include universal screening using validated questionnaires administered through a face to face interview. In addition, we stress the importance of the “warm hand-off” process to the care coordinator or other service provider on the plan of care, to increase the engagement of the family. Warm hand-offs have been found to significantly increase the likelihood of the family engaging in treatment services.

In the past year, the focus has been on getting hospitals and other community providers working on plans of care trained so that they could begin completing plans of care throughout New Mexico. In the coming year, the CARA workgroup intends to provide training to non-birthing hospitals as well as special populations that include: tribal, corrections, homeless and prenatal providers. We know that currently not every family who is experiencing substance use disorder is receiving a plan of care and thus our need to continue to expand our work. The CARA workgroup has begun creating recorded training modules with the University of New Mexico that can be accessed by all New Mexico health providers and offer continuing education credits for completing them. This will allow the CARA navigators to continue working on providing outreach and training on the non-judgmental approach that ultimately we hope will New Mexico can shift to. In addition, we would like to continue our efforts on improving education and intervention in women of child-bearing age and prenatally.

The CARA navigators have created resources for healthcare providers in order to understand what different programs offer families, such as, home visiting and early intervention. With these descriptors, we have provided web links to find which services are available throughout New Mexico to ensure providers can easily provide these options to families and connect them with the community provider prior to the family being discharged.

The CARA workgroup has also worked closely with the Statewide Central Intake (SCI) that receives calls for reporters on concerns for abuse and neglect. With the change in the children’s code, we have had to reword many of the intake questions around substance exposed infants. We have developed a process with SCI when we do have concerning cases that need a CYFD investigation opened after the initial plan of care has been developed. The SCI staff have identified areas that needed training or retraining throughout the year. In the coming year, we will continue to work with them on training their staff as well as the implementation of the new differential response which will involve many of these CARA families.

A CARA portal was created with a contractor, Falling Colors, in order to ensure all hospitals could create a plan of care within the portal and directly send notification to DOH and CYFD as well as the insurance Care Coordinator. The reason for its creation was to provide the most efficient and less time consuming process for hospital staff. In January, phase 1 of the portal was released to begin use and continue to modify the system to ensure we continue to build a better system. In July 2020, phase 2 will roll out which will allow automatic notification to DOH, CYFD and the insurance. In the next year, the CARA workgroup will continue to work with Falling Colors to develop further phases of the portal.

Family First Prevention Services Act:

Signed into law in February 2018, the Family First Prevention Services Act places new restrictions on the use of Title IV-E funding for congregate care programs, and makes IV-E funding available to fund time-limited mental health and substance use disorder services to parents of children considered candidates for foster care. With the support of consultants, CYFD is currently in the process of planning its implementation of the law, and has formed three workgroups: Congregate Care, Least Restrictive Settings, and Prevention. These groups meet monthly, and will coordinate any necessary adaptations to the service array. CYFD's implementation of each of these priorities may impact the program elements described in this CFSP. CYFD will detail any changes in its APSRs.

CYFD BHS leads CYFD's FFPSA Community Behavioral Health Workgroup, focused developing a comprehensive continuum of behavioral health services for children, youth and their families statewide. Specifically, this workgroup is focused on the expansion and sustainability of Behavioral Management Services (BMS) as a strategy to reduce out-of-home placements and support return to the community of children and youth in out-of-home/out-of-state placements. Behavioral Management Services (BMS) is a Medicaid billable service that CYFD BHS certifies. BMS services was significantly reduced statewide following the de-stabilization; currently there only eight providers. The goal of the Pilot Project is to reestablish the integrated BMS service statewide. The Workgroup includes representatives from CYFD, the Human Services Department (HSD) Medicaid Assistance Division (MAD) and Behavioral Health Services Division (BHSD), BMS providers, MCOs, and other key stakeholders. The intent of the service is to prevent or correct institutionalization of children. This service is intended to be adjunct to specialized services the child and family needs, not stand alone. Medicaid billable services like Comprehensive Community Support Service (CCSS), therapy, medication management will be individualized and utilized. Additionally, providers are being trained in the Nurtured Heart Approach and supported to hire Family Peer Support Workers. CYFD BHS is also supporting providers to use the Child and Adolescent Needs and Strengths (CANS) tool for BMS involved children and youth. CYFD is partnering with HSD MAD to modify BMS codes for the pilot to remove billing edits, as well as approve use of a billing code for the CANS. CYFD is partnering with the University of New Mexico (UNM) to evaluate the pilot program and adjust as necessary for further pilot expansion statewide.

LCA leads the Congregate Care workgroup, which has developed and is implementing strategic planning to work towards meeting Family First requirements. LCA hosts weekly meetings with residential and treatment foster care providers to support them through the COVID-19 pandemic emergency. Behavioral Health Services and LCA have partnered with the Building Bridges Initiative, who have initiated training for New Mexico providers and continued collaboration is occurring between providers and BBI, which is a component of FFPSA work.

Agency Responsiveness to the Community

In its last CFSR, PSD was found to be in substantial compliance with agency responsiveness to the community. PSD was found to have successfully engaged stakeholders at the county and state levels. Examples of the state level are MDT's, CCIC, Tribal-State Consortium, JPAs, IGAs, and

technical assistance with tribes and pueblos. PSD has also increased collaboration with the CYFD Behavioral Health Division to improve provider collaboration and overall services to children and families in New Mexico.

PSD shared the 2018 APSR with tribes and pueblos and will continue to collaborate in trainings, Title IV-B meetings, and workgroups. PSD also shared the 2018 APSR with the Administrative Office of the Courts, the CCIC, county offices, and posted the 2018 APSR on the CYFD website at www.cyfd.org.

Additionally, CYFD has developed and supported the PullTogether initiative (PullTogether.org) as a resource for staff, providers, community members, family members and youth to identify and locate services and non-clinical supports in their local communities.

CYFD's current practice will be sustained during 2020-24, and comprises the following:

CYFD responds to concerns from the community by utilizing a constituent management process that ensures the agency responds to questions and concerns in a timely manner. CYFD staff review and respond to requests by phone, email, or US mail as appropriate.

CYFD also participates in a multi-disciplinary task force to address concerns regarding policy and procedure, training and retention of foster parents.

CYFD responds to invitations for meetings/committees and workgroups by community members or stakeholders and strives to participate actively

CYFD will include stakeholders in development and revisions of policy and procedures as it pertains to their area of expertise.

Foster and Adoptive Parent Licensing, Recruitment, and Retention



As part of its last CFSR, PSD was found to be in substantial compliance with two of the four items in the Foster and Adoptive Parent Licensing, Recruitment, and Retention systemic factor. PSD was not in substantial compliance with Items 35 and 36. The following brief updates pertain to CYFDs current progress in that area:

- Item 33. Standards Applied Equally:
The foster and adoptive parent licensing, recruitment, and retention system is functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds.

PSD continues to work on finalizing the Licensing Requirements for Foster and Adoptive Homes policy and procedures. These updates should go into effect by summer of 2020, and were developed utilizing the feedback from the licensing workgroup which included foster parents, child placement agencies and PSD staff. PSD has a new position within the Prevention, Placement and Adoption Resource Bureau (PPAR) to do internal reviews of the CYFD Foster cases to ensure that we are following licensing requirements and to give technical assistance to both CYFD staff, families and community providers when necessary.

- Item 34. Requirements for Criminal Background Checks:
The foster and adoptive parent licensing, recruitment, and retention system is functioning statewide to ensure that the state complies with the federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.

PSD has streamlined the criminal background check (CRC) and child abuse and neglect check process. CRC applications are updated and CRC 101 training will be part of an ongoing PPAR training to the field and community providers as necessary. PSD processes relative foster parents get fingerprinted within 24 hours of completing a fingerprint registration. Results are available within 48 hours. Providing CRC results earlier in the process helps staff make better placement decisions for foster children.

- Item 35. Diligent Recruitment of Foster and Adoptive Homes:
The foster and adoptive parent licensing, recruitment, and retention system is functioning statewide to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide.

It is the Foster Care and Adoption Bureau's goal to continue to work on the development of a comprehensive foster parent plan that will include recruitment and retention of foster families from the time of inquiry, licensure and first placement. We have hired the new Foster Care Manager who will continue to collaborate with the Adoption Manager within (FAB), Regional Managers (RM), County Office Managers (COM), Placement Workers (PW), Navigators, County Based Recruitment Teams (CBRT) internal support services and external vendors via contracts. This plan will include an objective, goals to achieve the plan, action steps for each goal, responsible persons for each action step and time frame as to when each goal is to be accomplished.

Objective: Expand the number of foster and adoptive resources to ensure that each child needing foster care placement has at least two potential placements that reflect their need for the least restrictive and most appropriate environment.

Goal 1: Ensure FACTS Data is entered timely and accurately.

Analyze FACTS data for accuracy and the tools used by the field to assist in FACTS data entry.

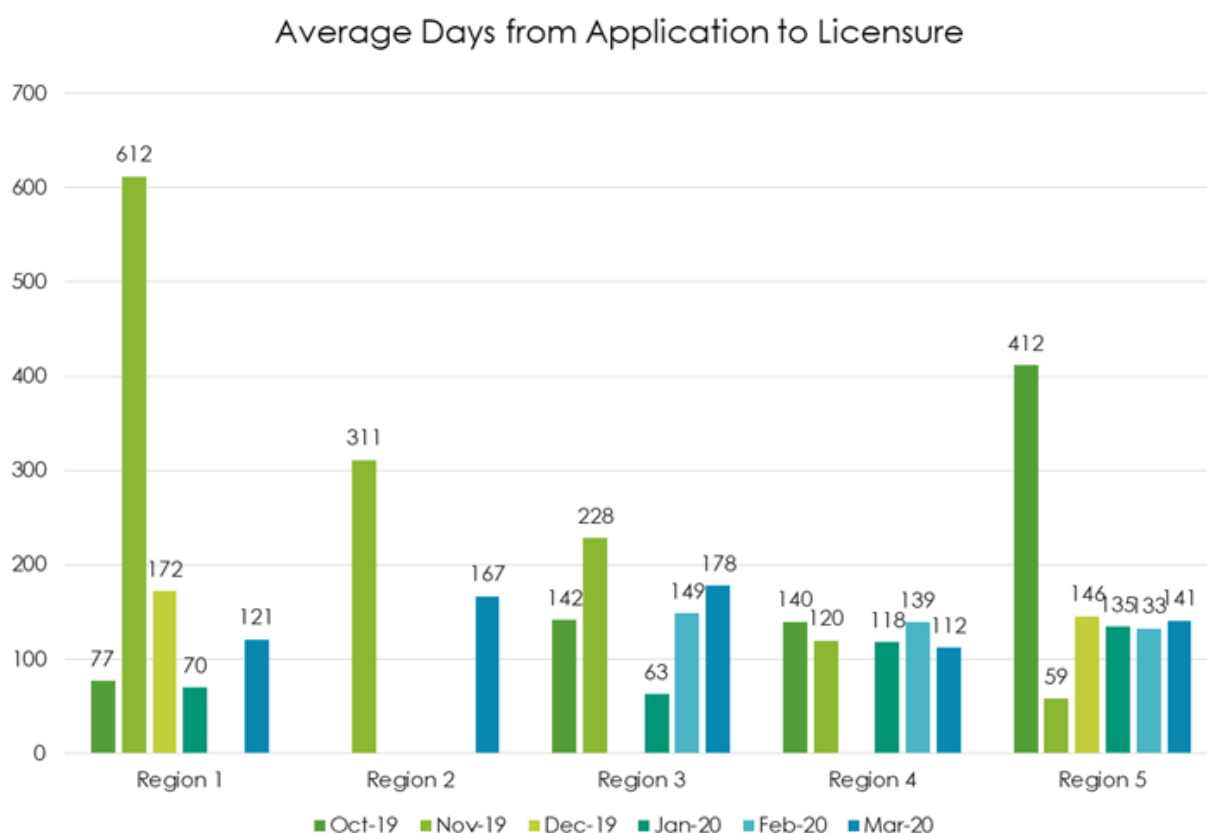
The Foster Care and Adoptions Bureau (FAB) in collaboration with PS Research, Assessment, and Data Bureau (RAD) will develop a plan to analyze FACTS data for inaccuracies and areas of improvement as well as the tools the field uses to assist with accurate FACTS data entry. FAB will collaborate with the FACTS Support Unit and County Placement Staff to implement a plan for Placement staff to attend training that will demonstrate how and when data shall be entered into FACTS. FAB will develop a Quality Assurance plan that allows COMs and Placement Supervisors monitor the timeliness and accuracy of their PWs FACTS data entry.

FAB along with PS Leadership will research the use of WEB-BASED APPLICATION, a foster care software that assists in tracking inquiries, online applications, application approvals, other required paper work and status of licensure, so that placement staff spend more time with families rather than paperwork.

Goal 2: License Foster Homes within 120 days

Of the non-provisional licenses that were approved-Standard between May 2019-April 2020, 63.6% were licensed in less than 120 days from the date the inquiry was accepted.

It is the CYFD's goal to ensure that individuals and/or families that have successfully submitted an application to become a Foster Parent are licensed within one hundred and twenty (120) days. Those interested in becoming a foster parent are initially tracked in FACTS as an intake. It is during this time frame that the employed and contracted Navigators provide support to prospective foster parents. The 120 days does not start until an application has been submitted, approved and a pending application is created in FACTS.



Goal 3: Increase the Number Licensed Foster Parent Homes

CYFD Placement Staff shall increase the number of Licensed Foster Parent Homes statewide by 15%. Per ROM unit the number of Foster Homes statewide decreased by 11% for FY19.

Each county's recruitment plan shall be data driven. Targeted recruitment requires a county-based readiness assessment through comprehensive data analysis. The readiness assessment identifies the child's specific age, gender, race/ethnicity, special needs, and sibling group among

some of the characteristics. The readiness assessment also helps to gather needed data regarding current foster family characteristics.

Development of a targeted RR plan assists each county in identifying their current foster home resources and helps to determine which types of families they need to focus recruitment efforts in order to meet the needs of children in care. A good recruitment plan not only helps identify appropriate providers to children in CYFD custody, but may avoid additional foster care moves and subsequent trauma that is caused by numerous foster care moves.

CYFD's IT Unit has recently launched in each Region a web based dashboard that extracts data entered into FACTS and helps PSD Workers from RMs, COMs, Placement Supervisors and PWs see their current "Providers." The providers are the current licensed foster parents. The My Providers Dashboard is able to filter which providers are available by worker, team and region.

Goal 4: Retention of Current Licensed Homes

Counties will retain 80% of currently licensed homes. Of the Licensed foster parents who were active on 5/31/2019, 64% were still active on April 30, 2020.

The FAB's new Foster Care Program Specialist will work with each Regions CBRT to provide technical assistance, support, and facilitation and monitor each counties retention plan. The FAB's Foster Care Program Specialist will ensure that each counties RR plan includes strategies that will aim to keep those families already licensed, thus reducing the attrition rate.

CFYFD's IT Unit has recently launched in each CYFD Region a web based dashboard that that extracts data entered into FACTS and helps PSD Workers from RMs, COMs, Placement Supervisors and PWs see their current "Providers." The Dashboard is able to filter the available providers by worker, team and region.

Goal 5: Train CYFD Placement Staff to help support Foster Parents

The FAB will coordinate and provide training to new and current CYFD Placement Staff with their roles and responsibilities as a placement worker and the policies and procedures they shall follow.

The Placement Training will embrace a "Back to Basics" culture and contain the following training modules:

Placement Workers roles and responsibilities	COM & Placement Supervisor roles and responsibilities
FACTS data entry	Criminal Records Checks

Guardianship Assistance Program (GAP) Eligibility	Adoption and Guardianship Subsidy Negotiations
ICPC	ICAMA
Partners in Service training internal & external	Licensing Regulations
SAFE (Structured Analysis Family Evaluation)	Resources and Training for prospective and current licensed foster parents

These various training topics will be provided to placement staff through individual modules and as needed throughout the year. SAFE training will be conducted by the Consortium for Children under contract utilizing Title IV-E funds.

In order to recruit and retain more foster parents, PSD has updated the foster parent licensing policy standards to reflect model licensing standards. In addition, the department did purchase BINTI to streamline the licensing process, communication, and matching for adoption. PSD will also re-focus efforts on relatives and preserving New Mexico families either through relative foster, guardianship, or relative adoption, including tribal customary adoptions. Specific contracted support will be provided for offices struggling with culture change as the department promotes relatives as caregivers. Contracted services include home studies, shadowing, review, and technical support to office staff and families. Seneca Family Search service will be utilized to find relatives early as well as at any point in the case to achieve permanency.

CYFD training department will continue to revamp RAFT foster parent training for 2020 to continue to provide quality training online, in class, and individually through family-based training to meet needs. This will include the initial training as well as ongoing training, services support, and peer support. The department will also increase training for staff. With Covid-19 pandemic and the health concerns in person training has been put on hold, and webinar trainings are being developed.

We have decided not to hire a kinship program manager, but rather hire an additional navigator - the two navigators will be supervised under the Foster Care Manager, Estella Swain. Current Kinship Navigator has been working with CYFD field offices in giving them training. An RFP was not completed for Kinship. We awarded small purchase contracts FY 20 for legal services and contracted with SWFG to provide services in three pilot counties (Bernalillo, Rio Arriba and Dona Ana). SWFG would serve as a "Hub" in those communities (Tuscon Model) to provide multiple services to relative and kinship families in and out of CYFD custody. An RFP for FY21 will be awarded for legal services. Contract will be maintained with SWFG and the goal is to expand services/"Hubs" statewide.

PSD has implemented targeted recruitment plans in every county for foster and adoptive families. The Foster Care and Adoptions Bureau continues to provide training and technical assistance to all counties when requested, as they develop and implement their targeted recruitment and retention plans. These specific areas are retention of current resource families, recruitment of additional resource families and response and retention of prospective families from inquiry to licensure. Technical assistance by the Foster Care and Adoptions Bureau provides support, guidance, observation and examples of measurable plans. The Bureau will provide ongoing feedback on the targeted plans as necessary.

PSD continues to support prospective foster and adoptive families through the Regional Resource Family Navigator Program. PSD currently has eight internal Navigators located throughout the state that guides families through the licensing process with the primary goal of providing a support system to prospective foster and adoptive families that will assist them in navigating the child welfare system. Internal navigators are responsible for the facilitation of the various county recruitment and retention plans for their Region. PSD has worked to develop a support system that would help guide, mentor and keep families engaged while helping them to experience a reduced length of time in achieving licensure. PSD is ending contractual services with navigators as data did not demonstrate a significant increase in foster parent licensure through these contracts. PSD internal navigators and placement workers will continue to support families.

- Item 36. State Use of Cross-Jurisdictional Resources for Permanency Placements: The foster and adoptive parent licensing, recruitment, and retention system is functioning statewide to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide.

PSD is committed to continuously improving the process of licensing, recruitment and retention of foster and adoptive parents. In order to understand some of the key entry and barrier points for foster parents, stakeholder interviews are conducted to engage the voices of those families. Some of the feedback is detailed below: This will continue with the new Foster Care Child Placement Agent (CPA) for internal review of foster licensure, and stakeholder's feedback.

Fiesta which is contracted through All Faiths has been a great resource for foster/adoptive parents, some have indicated they would not "have made it the first year without Fiesta (Family Activities, Information, Education, Support, and Training)." (Developed by a group of adoption professionals to support adoptive parents, Fiesta provides services to any adoptive family, including biological children with adopted siblings. Fiesta addresses issues such as grief and loss, difficult behavior, race and culture, and mental health. Fiesta works with our internal Heart Gallery which also works on recruitment and trainings for families.

Working with Biological parents: Training has been given through a webinar in May of 2020 to Foster and Adoptive parents who registered about how important it is to work with biological parents/kinship. Training was also given to Placement and Permanency on the kinship process

and how to work with the Foster parents to learn how important children being able to maintain with kin. Case workers need to understand that foster/adopted children will see other children in the foster/adoptive family, and should also see their biological siblings in other homes. It sometimes happens that relatives appear after years, and express interest in their relative child. Encouraging relative connections doesn't mean they have to live with them. Case workers should communicate with relatives about the status of their relatives in care. Encouraging relative connections doesn't mean they have to live with them. Case workers should communicate with relatives about the status of their relatives in care.

3. Update to the Plan for Enacting the State's Vision & Progress Made to Improve Outcomes

Revisions to Goals, Objectives, and Interventions

Plan for Enacting the State's Vision

CYFD's 2020-24 Child and Family Services Plan (CFSP) has a primary goal of ensuring the safety and wellbeing of all children who come to the attention of the Department, and advancing permanency as quickly as possible for children who cannot be safely returned to their parent(s).

The following goals are intended to simultaneously sustain and improve progress towards achieving the goals specified in the 2020-24 CFSP and associated Performance Improvement Plans, and to align the CFSP with the broader vision and strategic plan of Cabinet Secretary Brian Blalock, who assumed leadership of the department in January 2019.

The Secretary has directed PSD to structure its work around several key priorities, around which division leadership is organizing short, medium, and long term objectives. Current objectives under each priority include the following:

- Prevent Child Fatalities and Child Trauma
- Transition CYFD to data driven decision making by adopting validated tools:
- Increase the Availability of Appropriate Placements
- Expand Community Based Supports for Appropriate Placements
- Prevent Homelessness
- Fill Workforce Vacancies and Improve Morale
- Optimize Funding
- Optimize Accountability

As noted elsewhere in this document, during 2020-24, CYFD will implement a number of significant reforms, motivated by state and federal legislation. These include the implementation HB376, which creates an Alternative Response program; the implementation of HB230, which transforms planning for substance exposed newborns; the implementation of SB23, which takes advantage of the federal Fostering Connections to Success and Increasing Adoptions Act to

extend IV-E funded foster care supports to age 21; and the implementation of the Family First Prevention Services Act, which restricts the use of congregate care and expands services for children considered candidates for foster care. Each of these implementation processes will be structured around a formal work plan, and leadership will be responsible for integrating those work plans across the various projects and priorities.

The Cabinet Secretary is also in continuous communication with the Governor's office and Children's Cabinet, and is structuring planning processes to align with the timelines for state budget development and legislative cycles.

CYFD will draw on the resources detailed throughout this document to effectively and efficiently execute the strategies outlined below, and looks forward to reporting its progress through upcoming APSRs.

Goals, Measures, Objectives, and Benchmarks

As noted throughout this report, at the direction of the new Secretary, CYFD is in the process of a revision of its comprehensive strategic plan. CYFD staff have identified overarching goals and 15 areas in need of implementation work planning. Teams have been assigned to develop detailed work plans for each goal, including Objectives, Strategies, Measures, and Benchmarks. The expected adoption date for these work plans is September 30, 2019. The first two goals below are continued from the 2015-19 CFSP. Goals 3 - 11 are those goals drawn from the department-wide strategic plan that are relevant to this CFSP.

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

CFSR Permanency Outcome: 1. Children have permanency and stability in their living situations.

Measure: PSD will measure progress statewide using baselines and targets for Permanency Outcome 1 also outlined in Section II.

Objective 1: Through the use of a comprehensive CQI system PSD will use data to identify problems and root causes related to placement stability. PSD will research solutions and collaborate with colleagues and partners to address identified problems and root causes.

Objective 2: CYFD will provide technical assistance and accountability to local offices to support them in utilizing CQI data and processes to improve performance against identified benchmarks.

Strategy 1: The Research Assessment and Data (RAD) bureau will provide counties with data specifically related to placement stability including targets, goals, and projections.

Strategy 2: PSD continues to utilize Striving Toward Excellence Program (STEP) to strengthen a county office’s capacity to identify problems and root causes related to placement stability.

Strategy 3: Counties will be supported in utilizing data to assess progress, and inform experiments and office hours.

Strategy 4: PSD will convene statewide meetings quarterly to determine which promising practices related to placement stability should be scaled statewide.

Benchmarks	Baseline	CY 2019 Data	2024 Target
By June 30, 2024, at least 36% of cases reviewed will be rated as “substantially achieved” on Permanency Outcome 1 of the CFSR-OSRI.	22.1%	34.58 %	36%
Percent of children in foster care for up to 12 months with no more than 2 placement settings.	74.7%	71.96%	79.2%
By June 30, 2024, at least % of cases reviewed will be rated as “substantially achieved” on Item 6 of the CFSR-OSRI.	34%	47.66%	58%

Goal 2: Decrease repeat maltreatment.

CFSR Safety Outcome: 1. Children will not have a substantiated maltreatment report within 6 months of a prior substantiated report.

Measure: PSD will measure progress statewide using baselines and targets for Safety Outcome 1 also outlined in Section II.

Objective 1: Through the use of a comprehensive CQI system PSD will use data to identify problems and root causes related to placement stability. PSD will research solutions and collaborate with colleagues and partners to address identified problems and root causes.

Objective 2: CYFD will provide technical assistance and accountability to local offices to support them in utilizing CQI data and processes to improve performance against identified benchmarks.

Objective 3: Increase staff knowledge in assessing child safety and increase accuracy and consistency in the use of the New Mexico Child Safety Assessment statewide.

Strategy 1: The Research Assessment and Data (RAD) bureau will provide counties with data specifically related to placement stability including targets, goals, and projections.

Strategy 2: PSD will utilize Striving Toward Excellence Program (STEP) to strengthen a county office’s capacity to identify problems and root causes related to placement stability.

Strategy 3: Counties will be supported in utilizing data to assess progress, and inform experiments and office hours.

Strategy 4: PSD will convene statewide meetings quarterly to determine which promising practices related to placement stability should be scaled statewide

Benchmarks	Baseline	CY 2019 Data	2024 Target
By June 30, 2024, at least 85.8% of cases reviewed will be rated as “substantially achieved” on Safety Outcome 1 of the CFSR-OSRI.	85.1%	88.42 %	85.8%
Children will not be subject to a substantiated maltreatment report within 6 months of prior substantiated maltreatment.	89%	89.62 %	93%
Rate of maltreatment victimizations per hundred thousand days in foster care.	16.14	13.37	8.5

Goal 3: Prevent Child Fatalities and Child Trauma

Measure: PSD will measure progress using statewide data regarding child fatalities and serious injury. This is a new measure for SFY 21 that we are reporting to the legislature. We are proposing it to be calculated as follows:

Denominator: Children who had a substantiated serious injury during the quarter.

Numerator: Of the children in the denominator, those who had a CPS investigation in the 12 months preceding the report of serious injury

Objective 1: Develop a protocol for intensive assessment and evaluation of families with repeated referrals

Objective 2: Develop a comprehensive, accessible inventory of available prevention programs

Objective 3: Implement improved training for all PSD staff, specific to prevention of child death and trauma.

Strategy 1: Strategy 1: Develop a multi-disciplinary team and comprehensive plan to prevent child death and trauma.

2020 Update: A team has been selected and has started meeting to develop a plan

Strategy 2: Conduct analysis of 15 years of child fatality and serious injury review data.

2020 Update: The PS Research, Analysis and Data Bureau has begun the 15 year review of data.

Strategy 3: Implement screenings for all youth who are in CYFD's custody through the CANS with ACES subpart with appropriate response that takes into account behavioral healthcare needs and social determinants of health.

Strategy 4: Conduct literature review of Critical Incident Review procedures to inform revision of policies and procedures.

2020 Update: This is one of the tasks of the multi-disciplinary team and will incorporated into the larger plan to prevent child fatalities.

Goal 4: Improve the performance of Statewide Central Intake (SCI)

Measure: CYFD will measure progress against agency targets for staffing levels and call wait times.

Objective 1: Improve staffing Levels

Strategy 1: Aggressively fill vacancies.
Hire at least 20 full time positions by December 31, 2019

2020 Update: 20 full time positions have been hired and filled.

Strategy 2: Add double filled positions.
Add 8 double-filled positions by December 31, 2019

2020 Update: Eight double-filled positions have been added.

Strategy 3: Add 2 additional SCI supervisor positions by December 31, 2019.

2020 Update: Two additional SCI supervisor position have been added.

Strategy 4: Cross train other PS workers to fill in when SCI is short staffed.

2020 Update: This strategy has not yet been implemented. New Mexico State Employees have been practicing social distancing and working from home when possible in response to the COVID-19 pandemic. Additionally, SCI staff have been responding to COVID-19 related questions and issues. This strategy will be pushed back until end of FY 2021.

Objective 2: Improve Call Wait Time

Strategy 1: Add SCI processes to include triage and other refinements so that wait times are below 10 minutes and emergency investigations occur within an appropriate expedited timeline, create alternative means to make urgent referrals from systems partners, and train workers on utilizing the structured decision making tool in a way that protects older youth.

2020 Update: SCI had added processes to include triage and other refinements so that wait times are below 10 minutes and emergency investigations occur within an appropriate expedited timeline. SCI has also created alternative means to make urgent referrals from systems partners, and train workers on utilizing the structured decision making tool in a way that protects older youth.

Objective 3: Increase/streamline accessibility to SCI

Strategy 1: Develop protocols and staff training regarding responding to reports regarding older youth and youth self-reporting.

2020 Update: All reports are taken and staffed accordingly to the information received for all age groups.

Strategy 2: Develop and implement a web based reporting system for use by public schools

- Launch a pilot system in Albuquerque Public Schools by October 1, 2021
- Expand the system to Doña Ana County schools by March 31, 2021.
- Statewide rollout by October 1, 2021.

2020 Update: Implementation of web based reporting was done in FY2020 for the following cities: Alamogordo, Albuquerque, Belen, Bloomfield, Gadsen, Hagerman, Los Lunas, Lovington, Moriarty, Edgewood, Pojoaque, Quemado, Roswell, Santa Fe, and Silver City. Due to the pandemic other cities has been delayed in implementing the reporting system however the rollout dates set forth in 2019 should still be met.

Goal 5: Transition CYFD to data driven decision making and adopt validated tools

Measures: CYFD currently has access to very limited sources of reliable data. Each of the Objectives and strategies below specifies a timeline to implement data collection and for establishing baseline

Objective 1: Select validated tools to support case-level decision-making, management, and policy

Objective 2: Establish reliable measures and baselines using data from selected tools

Objective 3: Develop department-wide policies, protocols, staff training, and accountability measures that integrate and are responsive to data and validated tools.

Strategy 1: Implement Structured Decision Making

- Initial implementation begun in March 2019
- Pilot program through 12/31/19
- First data pull in January 2020; revisions to training and policies as indicated

2020 Update: CYFD implemented a new SDM as of January 2020.

Strategy 2: Implement Child and Adolescent Needs and Strengths, including the Adverse Childhood Experiences assessment, across the department

- CANS implemented for all court-involved youth by January 2020
 - Baseline established by June 30, 2020
- CANS implemented statewide for non-court involved youth by December 2020
 - Baseline established by June 30, 2021

Strategy 3: Implement the validated Child Sexual Exploitation-Identification Tool across Departments

- Pilot implementation in border counties in August 2019
 - Baseline established by November 30, 2019
- Rollout in Bernalillo County by June 2020
- Rollout statewide by October 2020

2020 Update: Due to COVID-19 Pandemic the pilot implementation to October 2020. This strategy will be rolled back to the following dates:

- Pilot implementation in border counties in October 2020
 - Baseline established by February 28, 2021
- Rollout in Bernalillo County by June 2021
- Rollout statewide by October 2021

Goal 6: Double the number of relative placements over the next five years

Measure: CYFD will measure progress in relation to the number and proportion of relative placements of foster youth.

Objective 1: Double the number of kin placements over the next five years
Current baseline: 23% of current foster youth in out of home placement are placed with kin.

Strategy 1: Institutionalize family finding to identify additional potential kin caregivers

- All relevant staff trained by 12/31/2019
- Pilot implementation with new cases through June 30, 2020.

2020 Update: This strategy has not been completed. As a result of the COVID-19 pandemic, it was decided to move this training back to FY 2021. The newly hired foster care manager will be reaching out to Seneca Family Finding by the end of this month (June 30, 2020)

Strategy 2: Partner with the NM Aging and Long-Term Care Department to develop and implement a subsidized guardianship program for children who are not federally eligible.

- Data analysis and baseline established by October 1, 2019
- Model developed and agreements negotiated by June 30, 2020
- Pilot implementation through December 31, 2020
- Full implementation beginning January 1, 2021

2020 Update: In SFY 2019 there were 70 guardianships finalized. Policy and procedure is still in developments as are the agreements. PSD is on target for 2021 implementation.

Strategy 3: Partner with the NM Aging and Long-Term Care Department to develop and implement a subsidized guardianship program for children who are not federally eligible.

- Data analysis and baseline established by October 1, 2019; SFY19 there were 70 Guardianships finalized
- Model developed and agreements negotiated by June 30, 2020
- Pilot implementation through December 31, 2020
- Full implementation beginning January 1, 2021

Goal 7: Expand Community Based Supports for Appropriate Placements

Measure: CYFD will build data collection into each of the pilots described below, and will cross-reference data with relevant CWIS measures

Objective 1: Launch 5 pilot programs through a standardized Research and Development process consisting of five stages:

1. Planning
2. Pre-Launch
3. Launch
4. Measure + Refine
5. Scale (leveraging Medicaid funding)

Strategy 1: Launch Behavior Management Services (BMS) pilot

- Time limited, intensive, strength-based, community-located behavioral support to prevent institutionalization
- Currently in Planning stage
- Data analysis and baseline established by November 1, 2020
- Launch by July 1, 2020

Update 2020: CYFD-BHS and HSD partnered with two New Mexico providers: Mental Health Resources and La Clinica to provide enhanced behavioral management services. Enhanced BMS, is expected to launch on July 1, 2020. Evaluation will be conducted by UNM evaluation team, led by Brian Isakson.

Behavioral management services are delivered through an individualized plan based on a clinical assessment. Enhanced behavioral management treatment activities include identifying antecedents of behaviors, using a Nurtured Heart Approach and Motivational Interviewing to incorporate positive reinforcements, developing plans to address identified problem behaviors, coordinating interventions across settings, and training other individuals in a child's life to address behavior goals. The Nurtured Heart Approach® is a relationship-focused methodology founded strategically in The 3 Stands™ for helping children (and adults) build their Inner Wealth™ and use their intensity in successful ways. The Nurtured Heart Approach has been shown to create transformative changes in children diagnosed with ADHD, Oppositional Defiant Disorder, Reactive Attachment Disorder and other behavioral, emotional and anxiety related symptoms – almost always without the need for long-term mental health treatment. Motivational interviewing is a method that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior. It is a practical, empathetic, and short-term process that takes into consideration how difficult it is to make life changes.

Enhanced behavioral management services can be a stand-alone service, in which providers can continue to deliver services as a continuum of care and will not require to be paired with other services.

Enhanced BMS providers will implement and connect the Child and Adolescent Needs and Strengths tool (CANS). CANS is a multi-purpose tool developed for children's services to support decision making, including level of care and service planning, to facilitate quality improvement initiatives, and to allow for the monitoring of outcomes of services. The CANS is conducted every

six months. When assessing the youth and family's needs, the provider may discover the need for other community based services which may include referrals to: Family Peer Support, Youth Peer Support, and Wraparound.

Strategy 2: Peer Case Management (TCM) pilot

- Non-clinical intervention with an emphasis on lived experience and connection/maintaining
- Currently in Pre-Launch stage
- Launch by March 31, 2020

Strategy 3: EMT Corps

- Workforce development with wraparound therapeutic supports
- Currently in Planning stage
- Launch by June 30, 2020

Strategy 4: High Fidelity Wraparound

- SAMHSA funded pilot providing intensive care coordination in a strengths-based model focused on adult supports and behavioral health interventions.
- Currently in Launch stage, implemented using state only funds at six sites throughout the state, monitoring and revising.
- Data collection and baselines established by January 1, 2020
- Planned transition to scaling by July 1, 2020

Strategy 5: Infant Mental Health

- Medicaid-billable clinical and nonclinical interventions intended to support the social-emotional and behavioral development of children ages birth to five.
- Currently in Launch stage – implemented at sites in **Dona Ana, Silver City, Luna, Santa Fe, and Albuquerque.**
- Planned scaling through Medicaid billing by June 30, 2020.

Objective 2: Increase the availability of Medicaid funded community based services

Strategy 1: Conduct an analysis of the current use of EPSDT to finance supportive services statewide, and for CYFD youth in particular, by December 31, 2020.

Strategy 2: Assess program models, policies, financing, and procurement strategies in other states by June 30, 2020.

Strategy 3: Develop a plan to scale Medicaid funded service models incorporating learning and opportunities identified through the 5 pilots described above, by October 1, 2020.

Goal 8: Prevent Homelessness

Measure: CYFD will assess progress by tracking the number of children and youth known to CYFD who experience homelessness.

Objective 1: Establish a better understanding of homelessness among current and former CYFD dependents, including developing baseline measurements by December 31, 2019.

Objective 2: Implement strategies to reduce youth homelessness for youth 18-25 by at least 10% by December 31, 2020.

Strategy 1: Create an Office of Youth Homelessness and Transition Aged Youth by January 2020 to conduct a comprehensive analysis of youth homelessness, including risk and response.

Strategy 2: Office of Youth Homelessness and Transition Aged Youth will develop a set of recommendations by July 2020 for reducing youth homelessness among 18-25 year olds with previous out-of-home placement.

Strategy 3: Implement a screening tool for older youth to better identify and improve service delivery to survivors of child sex trafficking statewide by fall of 2020.

Strategy 4: Analyze and create protocols and policies across the agency to better support and ensure the safety of LGBTQ youth to be implemented by December 2020.

Strategy 5: Implement extended foster care in a youth-centered, trauma-responsive way to intentionally leverage its opportunity to reduce youth homelessness among vulnerable populations as appropriate with a participation rate of at least 75% of all eligible youth by July 2021.

Goal 9: Fill Workforce Vacancies and Improve Morale

Measures: CYFD will assess progress by monitoring employee responses to the

organizational health survey. Specific measures that will be tracked include responses to the following:

1. "In my office, coworkers take care of each other and provide emotional support when needed"
2. "Overall I have confidence in the leadership of my supervisor"
3. "How would you describe overall morale in your office"
4. "My office has access to a debriefing protocol for circumstances that are likely to cause secondary trauma"

Objective 1: By June 30, 2020, establish reliable mechanisms to gather baseline data and evaluate progress moving forward.

Strategy 1: Provide HR and Chief Data Officer with global access to SHARE by July 30, 2019 to improve ability to track employee retention and other employee vacancy data.

Strategy 2: By June 30, 2020, Conduct a compensation and benefit package analysis that considers geographical and other factors, and plan any indicated adjustments.

Strategy 3: Create a position in HR by January 1, 2020, to further develop data and analysis regarding retention.

Strategy 4: Increase response rate in the organizational health survey by 10% in each division over each 12 month period, beginning January 1, 2020.

Objective 2: Increase retention of employees

Strategy 1: Increase by 4% by December 31, 2019, employee use of benefits that increase retention i.e. loan repayment program, clinical social work supervision, educational leave commitment, training for advancement, etc.

Strategy 2: Increase by 10% by December 31, 2019, employees who take a leadership training advancement class.

Objective 3: Improve self-care and morale of employees

Strategy 1: Develop a mandatory debriefing protocol by September 30, 2019 for cases that are high trauma

Targets and Benchmarks:

- By June 30, 2020, increase by 5% overall employee response to the question “In my office, coworkers take care of each other and provide emotional support when needed” on the organizational health survey. 2018 baseline: 60%
 - By June 30, 2020, increase by 15% overall employee response to the question “My office has access to a debriefing protocol for circumstances that are likely to cause secondary trauma” on the organization health survey. 2018 baseline: 20%
 - By June 30, 2020, increase by 15% the number of employees responding “good or very good” to the question “How would you describe overall morale in your office” on the organization health survey. 2018 baseline: 40%
 - By June 30, 2020, increase by 10% the number of employees responding “agree or strongly agree” to the question “Overall I have confidence in the leadership of my supervisor.” on the organization health survey. 2018 baseline: 70%
-

Goal 10: Optimize Funding

Objective 2: Create protocols and infrastructure to better leverage stable funding streams for prevention and intervention services for youth at risk of and in care.

Strategy 1: Conduct an audit of both internal and external activities to better ascertain funding sources for prevention and intervention services by January 2020. Audit may include IV-E opportunities (including those created by the Families First Services and Prevention Act), Medicaid, and other.

2020 Update: CYFD is currently pursuing an expansion of our Medicaid administrative cost claiming. CYFD has held ongoing meetings with Ravel and New Mexico Human Services Division, and have identified a need to map Medicaid related administrative processes. Additionally, CYFD is working with a consultant from Annie E. Casey to review CYFD’s current claiming of Title IV-E administrative claiming functions.

Strategy 2: Implement strategies from the audit above as appropriate no later than July 2020 with a goal of increasing non-general fund revenue in Protective Services by 10% by July 2021.

2020 Update: In light of the COVID-19 Pandemic, this strategy will have to be pushed back to July 2022.

Strategy 3: Exit Current PIPs by March 30, 2020

2020 Update: PSD has exited its CFSP Program Improvement Plan as of this fiscal year. Since the COVID-19 Pandemic, all work in relation to the Title IV-E audits have been suspended. PSD will submit the final Title IV-E PIP report once the Stafford Act has been lifted.

Strategy 4: Develop a comprehensive screening tool for youth in CYFD’s custody for potential SSI eligibility and help youth apply, utilizing external

resources as appropriate, increasing SSI applications by 100% and the numbers of children on SSI by 50% by December 2020.

Goal 11: Optimize Accountability

Objective 1: Create an environment of accountability for CYFD leadership

Strategy 1: Hire youth with lived experience to act as full time policy staff to hold CYFD accountable to building a youth-centered, youth serving organization by December 2019.

Strategy 2: Create a Foster Parent Grievance Policy and implement by July 2020.

2020 Update: The foster parent grievance process has been incorporated into the December 2019 update to Foster Care Licensing Standards. The 2020 Prospective Resource Family Bill of Rights and Grievance process will be provided to all foster parents, and has been incorporated into the Licensing module as part of CCWIS implementation.

Strategy 3: Create structures for employee feedback regarding management morale, retention, conflict resolution, engagement, and opportunities for staff to implement by July 2020

Strategy 4: Create a foster care task force made up of members of the public, foster parents, kinship care providers, behavioral healthcare professionals, and CYFD staff to present recommendations about changes to CYFD's grievance procedures and other accountability mechanisms by November 2020.

Strategy 5: Create a public, accessible Children's "Report Card" in collaboration with the New Mexico Children's Cabinet to be released before January 2020.

Strategy 6: Create an Office of Children's Right, including a Director of Educational Advocacy, by July 2020, to act as an internal advocacy office to ensure that the civil rights of children in CYFD's care are being appropriately protected

Implementation & Program Supports

Implementation Supports

CYFD PSD continues to partner with the National Council on Crime and Delinquency (NCCD) Children's Research Center (CRC) to fully implement, support and increase PSD capacity in Safety Organized Practice (SOP). The supports that NCCD CRC provides to PSD has included updates to and training to staff on the Safety and Risk Assessment Tools as well as the development of and the initial training to staff on the Substitute Care Provider Assessment Tool. Current and on-going work through the PSD-NCCD partnership will continue to focus on supporting the further development of the Structured Decision Making System. Those activities include the automation of the Substitute Care Provider Assessment Tool as well as updating the Intake Assessment SDM tool which will help support the Statewide Central Intake (SCI) staff to make accurate and consistent screening decisions as well as support the division's new prevention efforts. NCCD will also support the implementation of the updated SCI SDM tool through training as well as develop a logic model for the CYFD PSD prevention track and the on-going training and coaching of PSD staff.

NCCD CRC also has provided support to PSD staff during the transition to remote work related to the COVID-19 State of Public Health Emergency order issued by Governor Michelle Lujan Grisham. NCCD CRC provided the division with tools and tips for PSD field staff such as: Safety Assessment and Planning During COVID-19; Supervision During Physical Distancing; Successful Video Visits with Young Children and Family Team Meetings During Physical Distancing. In addition, NCCD CRC developed and delivered webinars to PSD Field Staff on the topic of Assessing for Safety and Safety Planning during Physical Distancing and will deliver three additional webinars to staff on the topics of: Safety Planning during Physical Social Distancing - DV and Substance Abuse; Safety Assessment Deeper Dive - Danger Indicators vs Complicating Factors; Safety Planning with an Emphasis on DV and Substance Abuse; and Supervision with an Emphasis on Supervising Remotely.

Staff Training, Technical Assistance and Evaluation

CYFD is reexamining the structure, resourcing, content, and methodology of all of its internal and external training activities, and developing a five-year training plan, which will support New Mexico's 2020 – 2024 goals and objectives. The Department anticipates adopting the plan in the second half of calendar year 2019. The training plan will expand on the success of the APDT NET for new employees and the complimentary coaching strategies of the Coaching program. The training plan will use the existing curricula and models to evaluate them for success in linking topic areas to core competencies and revise from there. The plan will outline the core competencies for a new employee to gain within their first six months and then create certification levels for employees to continue growing their knowledge and skills. These certification levels will include multiple learning modalities incorporating training, coaching, self-directed learning and team learning.

The following is a summary of the staff development and training plan currently in use:

PSD operates a training and staff development program that supports the goals and objectives of the Child and Family Service Plan (CFSP). Children, Youth and Families Department New Employee Training (NET) training and PSD's advanced trainings are designed to support safety, permanency, and well-being for children, as well as PSD's CFSP Plan for Improvement goals. PSD has worked with the Academy for Professional Development and Training to include the Piñon Practice Model, Adaptive Leadership™, and Continuous Quality Improvement (CQI) into the FOP curriculum.

Each of these trainings is supported through a combination of state general funds and federal Title IV-E, Title IV-B Part 2, Chafee, CAPTA and other funds. Non-IV-E funds (e.g., Title IV-B Part 2 and CAPTA), although limited, provide important support for training for contract service providers, as well as staff training on topics not eligible for IV-E reimbursement.

Trainings are provided by Academy for Professional Development and Training, Protective Service Employees, Juvenile Justice Employees, and New Mexico State University Family and Child Welfare Training Project Employees. A cross division Training Advisory Council (TAC) continues to assist in development of staff trainings.

Title IV-E funded training provided to PSD staff include:

- Social Work Stipend Program: Through agreements with the four Universities offering Social Work programs in the state (New Mexico Highlands University, New Mexico State University, Western New Mexico University, and Eastern New Mexico University), stipends were offered to BSW or MSW students in exchange to work for PSD upon graduation.
- Foundations of Practice: Sessions are provided each month for 10 to 12 sessions per year. The training is completed in a five-week time frame, of which one week is on the job training (OJT) activities.
- Annual Court Improvement Project Cross-Training: These annual events are funded largely through the Court Improvement Project's cross-training grant, with some logistical support provided by SWIFCA through IV-E.
- Annual Foster Parent Conference and Recertification Training
- "Working with Youth": A six-hour training that includes information on positive youth development, adolescent brain development, youth engagement, talking with youth about sex, and youth safety issues.
- Special Topics in Adoption: Trainings are provided to CYFD staff and foster and adoptive families to assist in their knowledge in adoptions.

- SAFE Training: SAFE training is ongoing throughout the year, provided by PSD staff certified to train SAFE.
- Safety Organized Practice (SOP) Training: has been provided to all Supervisors and front line staff. Coaching has also been provided by NCCD and Casey to implement the CAP Framework and assist in getting the practice moving forward. A T4T was conducted to 22 staff, and they have trained the Intro to SOP to staff regionally.
- Cornerstone (Learning Management System): has been updated to include PS trainings. The system allows staff to register for trainings, offers CEUs, evaluation questions, as well as monitors and tracks staff participation.
- Sex Trafficking Training: All PS staff are trained in Youth Sex Trafficking. A curriculum was developed with the assistance of Behavioral Health and the PSD Training Director to include an e-learning component and a three hour face-to-face, regionally based training.
- FACTS Training: PSD FACTS Staff provide statewide training whenever the FACTS system undergoes a major revision. FACTS staff follow up throughout the year with county and regional “booster” training on complex topics relating both to annual and mini releases. PowerPoint trainings for the various aspects of the annual releases are made available to staff via the CYFD Intranet. Initial FACTS training is provided through e-learning during foundations of practice.
- Other Training: Other training for PSD staff is provided through Academy for Professional Development and Training in areas such as defensive driving, HIPAA, general supervisory skills, respect in the workplace, ethics, domestic violence and other topics.
- Regionally-Based Trainer Coaches (RBTC): Six Regional Trainer/Coaches (RBTC) provide training support, coaching, and monitoring learning. They are responsible for ensuring each employee in their region receives training that is position-specific, competency-based, and track-based. Each new PS employee has an individualized training plan developed and monitored by the RBTC. The RBTC ensures each worker completes initial training as well as ongoing required trainings, in addition to any supplemental trainings the worker or supervisor chooses to be added to the worker's training plan. The RBTC is also responsible for coordination and facilitation of field staff trainings as identified through the Quality Assurance Loop Around process and desktop reports. The RBTC acts as a coaching support to staff, and does hands-on skill building with staff. These positions are supervised by the PS Training Director.

PSD staff provide informal training and technical assistance regularly to staff in the field when the need arises. For example, the Interstate Compact on the Placement of Children (ICPC) Coordinator often provides training on changes in ICPC procedures; youth services staff provide training on emerging issues related to youth, etc. Training Provided Through Programs Included in the 2020-24 CFSP.

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

CAPTA: During 2015 – 2019, CAPTA funds were utilized to support and supplement several training efforts, including Circle of Security, Abuse and Neglect Detection and Reporting E-learning, and costs related to development of multi-disciplinary teams and Child Advocacy Centers (Valencia County). CAPTA funds support the attendance of PSD staff and attorneys at the annual Children’s Law Institute. PSD will also utilize CAPTA funds, IV-E and IV-B training funds to provide training on sex trafficking, human trafficking, labor trafficking, and prudent parenting.

Chafee: For 2015 – 2019, Chafee training funds were used to support the annual Independent Living Conference.

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

Training for Community Partners:

CYFD provides a range of training and technical assistance supports to local offices, service providers, and communities:

- Foster and Adoptive Parent Training: The staff and provider training system is functioning to ensure training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (that care for children receiving foster care or adoption assistance under title IV-E) that addresses the skills and knowledge needed to carry out their duties with regard to foster and adopted children.
- RAFT Foster Parent Pre-Service Training: PSD’s foster parent pre-service training includes skill building on childhood trauma and improves the quality of foster and adoptive parent preparation. Relative, Adoptive and Foster Training (RAFT) curriculum is provided in every county. Staff and contractors continue to go through a certification process to train the curriculum.
- Behavioral Health Services Training: CYFD Behavioral Health Services (BHS), in collaboration with PSD, is committed to the provision of quality behavioral health services and supports that are trauma-informed, evidence-based, culturally competent, and youth and family driven that meet the needs of CYFD's children and youth. To meet this goal, BHS collaborates with PSD to provide the following trainings to PSD staff, partner agencies, family members, youth, and community behavioral partners serving the PSD population.

- Youth Engagement Training: BHS developed a Youth Engagement Training (YET) curriculum developed by youth to enable them to train adults, professionals, and other community members to start the conversation on strategic planning around youth engagement efforts. In order to successfully build youth-driven teams, the adults are taught key concepts regarding how to empower youth to advocate, recruit, and support each other as peers and equal partners. This curriculum is facilitated by an adult partner and youth who has lived experience navigating children's systems (PSD, JJS, behavioral health, special education, etc.). To date BHS has trained over 23 Youth Trainers statewide (16 of those youth were recruited by PSD Youth Transition Specialist (YTS) staff) and 17 adult co-trainers (10 of which are PSD YTS staff). YETs were offered at each of the Five Days of Learning BHS provided in FY17 and at each PS county office statewide annually. YET was offered at the Children's Law Institute in FY17 and Foster Parent Appreciation Conferences. At the end of FY17, there were 466 PSD staff trained in YET with an additional 100 foster parents, 154 JJS staff, 13 BHS staff, and 206 other child serving partners such as behavioral health providers and school staff. In FY18, an additional 108 PSD staff and 85 foster parents were trained in YET. In FY19, BHS will continue to provide YET trainings as requested by PSD.

PSD will use training funds provided under the Title IV-E foster care and adoption assistance programs to provide training, including training on youth development, to help foster parents, adoptive parents, workers in group homes, and case managers understand and address the issues confronting youth preparing for a successful transition to adulthood and making a permanent connection with a caring adult.

Collaboration and Technical Assistance:

Under new leadership, CYFD has established an unprecedented level of collaboration with its sister state agencies.

- CYFD, New Mexico Human Services Department, New Mexico Department of Health, and New Mexico Aging and Long-Term Services Department are co-leading a project to build a Medicaid Management Information System (MMIS) that is also CCWIS compliant. It will replace CYFD's existing database, will help all participating agencies move towards increased data transparency and accountability, and will facilitate data-driven decision making across all participating departments.
- CYFD has partnered with ALTSD and local grassroots coalition Grandparents Raising Grandchildren to create additional supports for kinship providers. The first pilot approach will consist of creating a subsidized kinship-guardianship program for children who are not eligible for Title IV-E.

Current CYFD leadership is also accessing expert consultants as needed to achieve compliance with federal, state, and community mandates and expectations, as well as to address areas in need of improvement. Current consulting relationships include:

- CYFD will continue to access the resources available through the Capacity Building Center for the States.
- CYFD will continue to contract with National Center on Crime and Delinquency to support the implementation of Structured Decision Making.
- Casey Family Programs is supporting our work to clear the investigation backlog, as well as to understand the phenomenon of children who are detained for less than 72 hours, a subset of whom could be safely maintained at home.
- CYFD is collaborating with the American Bar Association's Commission on Homelessness and Poverty, who is providing technical assistance on the creation of a state-level Office of Youth Homelessness.
- CYFD is working in partnership and close collaboration with Albuquerque Police Department around how to respond and collaborate in response to reports of child abuse. Forty percent of the state's foster children are from Albuquerque.
- CYFD is collaborating with Albuquerque schools to improve foster students' ability to remain in their school of origin, and to plan better provision of supports and services for all foster students, and address persistent challenges with truancy.
- CYFD is collaborating with Disability Rights New Mexico and Pegasus to address pressing deficits in the system around providing appropriate and timely step down from residential facilities and more comprehensive provision of community-based legal services.
- Because NM has the second-highest population per capita of Tribal individuals in the country, CYFD is working in collaboration with the Tribes and the courts to create an ICWA court. PSD is also creating a dedicated ICWA team. Additional detail about these activities is included below.
- CYFD has contracted with California-based consultancy Social Change Partners to support the implementation of the Family First Prevention Services Act (FFPSA), and restructuring the child welfare system to be better able to provide prevention services at the right time to the right children and families.

Under leadership of the new Secretary, CYFD is in the process of revising its comprehensive strategic plan. To date, CYFD had adopted 15 agency-wide strategic planning goals. Each of these is assigned to a member of agency leadership, with the expectation they facilitate the development of specific outcomes measures and a detailed work plan. The expected date of adoption of the work plans is September 30, 2019. From that date forward, they will be tracked over time, utilized in staff supervision and planning, and regularly reviewed by the Secretary. Staff of the State of New Mexico Governor's Children's Cabinet has attended planning meetings to date and will be regularly informed of progress.

CYFD continues to contract with National Center on Crime and Delinquency and Casey Family Programs to provide technical assistance. Both conduct data collection and analysis as part of their work.

CYFD is also working with the New Mexico State Legislature's Legislative Finance Committee to scope a broad analysis of placement and services.

Five Year Training Plan Strategies in Support of 2020 - 2024 Goals and Objectives

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

1. The PSD Coaching Program is part of the strategy for assisting county offices build their capacity to identify problems and root causes (Strategy 3). The Regionally Based Trainer/Coaches (RBTC's) work individually with workers and supervisors to increase their assessment skills along with increased understanding of the Safety Decision Making (SDM) tool. Increasing these assessment skills within the field staff will directly impact each county's ability to identify problems, think collaboratively and creatively about solutions.
2. Assessment of the New Employee Training found that the current training has an opportunity to increase the ways employees manage their caseloads and use data to drive decisions. This is true of the leadership training as well. CYFD launched the new training in January 2020. Objectives within the new employee training include:
 - a. participants will understand the importance of utilizing data from ROM to assess progress; and
 - b. participants will learn strategies for meeting with their supervisor to present cases.

Goal 2: Decrease repeat maltreatment.

1. The PSD Coaching Program is working on increasing staff knowledge in appropriately assessing child safety through the use of Safety Organized Practice (SOP) and additional training in the SDM tool. New employees receive this training during their initial training at Foundations of Practice. Additionally, employees will be receiving individual coaching in these areas. PSD is moving towards an assessment-based coaching strategy to assess new employees, at regular intervals, based on self-reported and supervisor-reported assessments. These assessments will identify employees who need to improve their skills in the use of the assessment tools and their understanding to be increasing inquisitive around safety information, and how to engage with families.

2. Additional training is provided to employees in areas that are of significant contribution to repeat maltreatment, which includes the topics of: sex trafficking, domestic violence, and youth mental health first aid.
3. The PSD Coaching Program is collaborating with the Behavioral Services Department within CYFD to improve the training of employees on trauma and trauma responsive care. This training will impact the ability of employees to view bio-families through the lens of generational trauma and be better positioned to determine the need for referral to services and increase specificity of referrals to better engage families in the process of preventing future maltreatment.

Goal 3: Prevent Child Fatalities and Child Trauma.

1. In the revision of the “new employee training,” one of the objectives is participants will understand emotional intelligence and ways it can be applied to interviewing and assessment. This training will increase field staff’s ability to have a more inquisitive approach and a trauma responsive lens of gathering deeper information for greater impact in decision making.
2. The PSD Coaching Program is involved in training and coaching of the SDM tool to increase field staff’s ability to assess safety.
3. The PSD Coaching Program is awaiting findings from the Fatality and Serious Injury Review. In the results of this review, PSD will find areas of opportunity for increased training of field staff and also foster parents. PSD is prepared to include this information in the revisions of the training plan.
4. The PSD Coaching Program is leading the effort in training field staff in CANS and implementation of the tool.
5. The PSD Coaching Program is also working on the revision of foster parent training, which will include specific modules on trauma and trauma responsive care.

Goal 4: Improve the performance of Statewide Central Intake (SCI).

The training plan will impact the performance of SCI. It will be improved to have more specific training information focused on SCI’s roles and responsibilities.

Goal 5: Transition CYFD to data driven decision making and adopt validated tools.

The PSD Coaching Program is increasing training for the field staff across the state on the structure decision making tool. Along with the training is a foundational tool used in the coaching strategy providing parallel process for employees to determine how the tool increases their ability to assess and respond.

Goal 6: Increase the availability of appropriate placements.

1. Increasing kinship placements is a culture shift for many county offices in New Mexico. The PSD Coaching Program is tackling this culture shift through assisting PSD field staff in understanding the benefits for children and youth when maintaining kinship bonds.
2. The Coaching Program, Youth Services Bureau and Regional Placement are working together to form the Relative Care Team, which is building the skills and knowledge of PSD employees on the best practice of placing with relatives.
3. The RBTC's will assist field staff in taking a more inquisitive approach to safety assessments, which provides the field staff in the ability to ask and have questions answered by kinship placements, where as in previous culture, would have been seen as an immediate rule out.

Goal 7: Expand community-based supports for appropriate placements.

The PSD Coaching Program understands there needs to be increased training that community-based providers may access. The PSD Coaching Program and the APDT are working together to form a catalog of trainings that can be accessed by the community to build their knowledge of working with PSD field staff to recognize and refer child maltreatment cases. The training has a focus on helping the community understand the Safety Organized Practice model and understand what goes in to a child welfare workers assessment and intervention.

Goal 8: Prevent homelessness.

1. The PSD Foster Family Training is under revisions to include more training specific to youth engagement and de-escalation, to increase the ability of foster parents to interact appropriately and effectively with our youth. Additionally, this will increase the number of foster families comfortable with accepting youth.
2. Employee training includes youth mental health first aid.

Goal 9: Fill workforce vacancies and improve morale.

1. Training is a large part of retention of employees. As PSD revises the current training curriculum and structure, it will impact the retention of PSD staff. The increased use of RBTC's will provide field staff with an additional resource to build confidence in their ability to succeed in their role, an issue that relates to New Mexico's high turnover.
2. Leadership training has included a new module around hiring for intention. This training was developed in collaboration with the HR Recruitment and Retention Specialists.

3. PSD Training Department provides the leadership training.

4. Quality Assurance System

Currently, the quality assurance system is functioning statewide to ensure that it is (1) operating in the jurisdictions with the services included in the CFSP are provided; (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety); (3) identified strengths and needs of the service delivery system; (4) provides relevant reports; and (5) evaluates implemented program improvement measures.

CYFD's QA Unit conducts monthly reviews in a different county each month as the primary component of the QA process. The reviews include the CFSR case review, a review of legal files, and a review of foster care provider records. While the structure of the review has not changed significantly over the past year, several initiatives have been implemented to develop and improve CYFD's CQI framework.

The goal of the QA Process is to support the agency's mission to improve the quality of life for children by supporting staff and stakeholders through a framework of Continuous Quality Improvement. Implementation of this framework is premised on the value that CQI requires active participation from everyone in the agency, as well as our stakeholders and partners, and that CQI thrives in a culture that supports continuous learning. Following is some of the strategies implemented to support this goal.

Throughout 2017, the QA team implemented the Quality Assurance Loop-Around (QALA) following each QA review. The purpose of this process was to support counties in implementing PIP strategies and promoting data driven and results oriented practice. At the end of the year the QA team partnered with the data unit to evaluate the project and solicited feedback from participants through survey and focus groups with county management. The results of the project were mixed. It could not be demonstrated that the counties that participated in QALA had improved outcomes. Qualitatively counties reported that increased training related to understanding data and the CFSR outcomes was beneficial. As a result of this evaluation, the approach to QALA has been updated for 2018. A QA team member has been assigned as a liaison to each region and will reach out to county offices monthly to provide or arrange for support and training related to understanding data, utilizing ROM, understanding the CFSR Outcomes and PIP strategies, and best practice. The responsibility for developing and monitoring to county improvement plans has shifted to county and regional management.

In 2020-24, The QA Manager will coordinate the CQI County Improvement Plan (CIP) to include facilitation of initial QALA meeting and formal progress report meetings, track due dates, report all data and practices to executive management, assign RAD team members tasks to complete with the counties, communicate with county's QALA teams regarding quality of their CIP and any recommendations that may apply, and co-facilitate the monthly CQI-CIP to provide to support

counties in reporting their data and practices as needed. The CIP will include a measurement plan to evaluate outcomes and report progress. The RAD Bureau will be available for support through provision of technical assistance. The CQI team members will include County Management, STEP Team members from the County (if available), other county team members, a data unit staff person, a FACTS unit staff person, and any other identified internal or external stakeholders critical for success.

In order to assure compliance with CIP, Regional Manager and County Office Manager evaluations have been updated to include alignment of primary job assignments with CFSR outcomes, key child welfare outcomes, and implementation of CYFD practice initiatives. Manager evaluations include minimum benchmarks for identified outcomes:

Performance Measure	Standard for Achievement
Visits to each county office	At least Monthly
Monthly caseworker visits with all parents with a reunification plan in their place of residence	55%
Children with a reunification plan are returned home timely	40.5%
Children in care will be placed with safe and stable relatives	30%
Investigations will be completed timely	70%
Children will be safe from repeat Maltreatment	92%
Children with an adoption plan will achieve permanency timely	60%
All staff will receive a minimum of monthly individual supervision to address employee development	80%
Each county office will develop and implement a FC Recruitment and Retention Plan, including individualized retention goals	Individualized
All foster care applicants are licensed within 120 days of inquiry	95%
Each county office will develop and implement a worker moral and retention plan	Turnover Rate of less than 25% per year
Managers will attend all QA Review activities and develop and implement post review office improvement plans that address specific findings (QALA Plan)	Individualized
Managers will ensure adherence to CYFD policy and procedure and practice standards through training, coaching, and data review.	As required by CYFD Training Plan and determined through individualized assessment.
Managers will ensure timely and responsive customer service to families, foster parents, providers, and other stakeholders.	Review of payment data, constituent complaint data, and stakeholder feedback.

The Filed Deputy Director's will review data measures monthly with Regional Managers and the resulting performance plans to monitor progress and provide support around program improvement. The Regional Managers will review data measures with the County Office Managers and ensure program improvement plans are developed and implemented based on the specific performance outcomes identified through data review and CFSR reviews. Achievement of these standards will influence the individual manager's annual evaluation rating (Does Not Achieve Performance Standard, Achieves Performance Standard, Exceeds Performance Standard, and Exemplary).

Additional Practices and Strategies to be implemented in 2020-24 include:

Improved Information Sharing:

- Open Meetings: In an effort to promote CQI and the transparency of the review process, the QA Team has opened all review related meetings to county management, supervisors, and staff. County staff are invited to attend and participate in the planning meetings for the case staffings during review week, debriefings, the QA roll-up meeting, the exit conference, and the post review meeting with the second level consultant reviewer. The placement and legal reviews are also open meetings. County staff have provided positive feedback about this change to process and have identified these meetings as important learning opportunities for staff.
- Timely Reports: The QA Team has committed to sending finalized reports to the county within six weeks of the review. This has been mostly achieved since transitioning to the OMS for the review process. The county is provided with the data from each review as well as the individual review instruments.

Improved Collaboration with both internal and external stakeholders:

- Two QA liaisons have been assigned to each county to support the county office in CQI activities before, during, and after the QA review. Liaisons assist the county in interpreting review results, identifying strengths and challenges, and developing strategies. QA Team members have also been assigned as liaisons for Legal, Placement, and Statewide Central Intake. The Legal and SCI liaisons meet with those programs monthly after the review to discuss the review results as they relate to those program areas.
- The county STEP participants are invited and encouraged to attend all QA activities.
- Contract providers and contract managers are invited to attend QA meetings involving cases where services are provided through a contractor.
- The CFSR Coordinator facilitates a stakeholder meeting concerning the systemic factors on the first day of the monthly review.

Improved CQI Training and Outreach:

- Improved Peer Reviewer Training: The QA team convenes bi-monthly peer reviewer trainings to prepare agency staff, contractors, and Tribal partners to participate as peer reviewers. This is a comprehensive training that prepares participants to understand the CFSR outcomes and participate as a peer reviewer. To date nearly 200 participants have completed the training.
- Best Practice and the CFSR Discussion Group: This is a 2-4 hour discussion/training that the QA Team provides at the request of management or staff in a county office. The goal of this training is to provide an overview of the CFSR Outcomes and how to support improved outcomes through implementation of PIP strategies and best practice. Over the past year five county offices have been visited.
- Outreach to the County: Prior to each review, the QA Team hosts a one hour session with the review county to provide an overview of the review process and the CFSR Outcomes.
- Legal Review and Foster Care Provider Review Training: Each month the QA Team hosts a monthly webinar to discuss the legal review instrument and the foster care provider review instrument.
- CQI and Placement Meeting: At least quarterly, the QA Team hosts a statewide webinar with placement staff from around the state to discuss pertinent topics including CQI, targeted recruitment, the role of placement navigators, and full disclosure. At each meeting there is presentation of data to frame the discussion. There have been five meetings so far.
- Workgroups: The QA team members attend or facilitate various workgroups on numerous topics including ICWA, Safety Assessment and Planning, Supervision, Investigations, and SCI.
- The Post-Review CQI Plan/Quality Assurance Loop-Around (QALA): Following each Quality Assurance (QA) review, the QA manager will work with county managers to create a CQI team that will oversee the development and implementation of a county based program improvement plan (CIP) that directly correlates with the State Program Improvement Plan (PIP). The purpose of CYFD's Program Improvement Plans is to promote data-driven and results-oriented practice within the context of continuous quality improvement to improve child safety, permanency, and well-being.

The QA data and the CFSR review data, as well as the information gathered during the legal and foster care provider reviews, were utilized to inform the PIP strategies specifically related to the safety, permanency, and well-being outcomes. These PIP strategies include:

6. Pre-Initiation Staffing
7. Ongoing training on safety assessment and management and review of the instrument , how it is used and revisions as necessary
8. Improved quality and quantity supervision
9. The “warm handoff” to services providers
10. Caseworker visitation with parents where they live at least monthly

5. Update on the Service Descriptions

Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B, subpart 1)

CYFD has historically allocated IV-B subpart 1 funds to support staff in general responsibilities associated with the goal of keeping families together. Reporting continues to be complicated by challenges with data and financial systems. These are to be addressed through CYFD’s current planned overhaul of data and accounting systems. In the context of system wide strategic planning initiated under current leadership, the utilization of these funds will be reexamined and realigned to necessary and allowable purposes.

Child Abuse and Neglect Prevention Services AND PSSF

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

PSD utilized federal CBCAP and state general funds to provide community-based prevention and support services through a combination of contracted and direct services. Funds were also used to provide training to CBCAP and domestic violence funded service providers, child prevention awareness campaign efforts through Pull Together and family support services. Specifically, CYFD utilized CBCAP funds to provide evidence based family support programs for families with children 0-5 utilizing evidence based and evidence informed parent education curriculum. These programs use the CBCAP Conceptual Framework as the logic model for providing services.

As further detailed in CYFD’s 2020-24 plan, CYFD has recently consolidated contracts funded by both CBCAP and PSSF funds into “mega” contracts with providers to provide a continuum of services in a given area. These address a number of challenges documented by CYFD during 2015-19:

- The various PSSF and CBCAP programs were contracted to community based agencies through separate procurement processes. This limited the ability of agencies to be awarded all of the PSSF and CBCAP programs if they were unable to hire appropriate staff to meet each contract's unique staffing requirements. The rural communities in NM have a limited ability to hire qualified staff and meet the expectations of each contract, individually, as each contract requires a certain number of families to be served each year. In addition, high-needs families in New Mexico often need extended support services to maintain stability.
- CYFD recognized that family circumstances and needs fluctuate, requiring flexible programming to meet each family's unique needs. By combining the various programs under PSSF and CBCAP into one "mega" contract, CYFD through its contractors will offer a continuum of care and support to families. These services be offered in 24 of New Mexico's 33 Counties: Bernalillo, Catron, Chaves, Cibola, Colfax, De Baca, Dona Ana, Grant, Hidalgo, Lea Los Alamos, Luna, McKinley, Otero, Quay, Rio Arriba, San Juan, Santa Fe, Sierra, Socorro, Taos, Torrance, Union and Valencia.
- The "mega" contracts will enable rural communities the ability to provide comprehensive services to a wider range of families in need of support. The current programs limited the definition of "family" to biological parents or current guardians who had custody of the children when CYFD became involved with the family. New Mexico has a very diverse population, and often, extended family members become the primary caregivers of children. With the "mega" contracts, New Mexico has expanded program eligibility to not only biological parents, but to other family members, fictive kin, or anyone pursuing guardianship and adoption. In addition, foster parents will be eligible to receive services in order to help them meet the high needs of the abused and neglected children in their care. It is hoped that this expansion will help retain qualified foster parents.
- NM has a shortage of licensed mental health and/or substance abuse professionals in rural areas who are able to offer wraparound support to families. This lack of professionals coupled with high caseloads and field staff turnover, make it challenging to determine which community-based program(s) a family is eligible for. This means that many families who are eligible for services may not receive those services in a timely manner. The combined PSSF contract will alleviate this "guessing game" and allows the local CYFD office to refer a family in need to the local PSSF provider, and based on the referral information the PSSF provider will determine which service model (FSS, FP, TLR) is appropriate for that family. If family circumstances change, the provider could adjust services and reassign the family to a different model. Each model is driven by a tiered case management approach. Within the first few weeks of enrollment, the agency will conduct a thorough family assessment to determine the family's strengths, needs, and connections to informal/formal resources. Based on this assessment, the family will be assigned a tier level, which will drive the service intensity and planning. The tiered case management approach allows families to progress through the program at their own

pace, while at the same time promoting self-sufficiency by requiring families to engage and meet qualitative goals.

- CYFD recognizes that there will be a period of adjustment as staff learn the new program requirements. The implementation of the new PSSF program will coincide with the statewide roll out of the Safety Organized Practice Model, including the new safety assessment. As a result, staff will need additional technical support as they begin implementing the combined PSSF contract. The Community Services Bureau will collaborate with NCCD to provide an initial orientation to staff and will provide ongoing technical assistance to ensure quality outcomes.

The initial implementation of the Community Based Prevention, Intervention and Reunification (CBPIR) contracts has been well received in the counties where they are available. Although CBPIR is new, many of the services provided through the contracts are familiar to PSD staff, community based providers, and the families who are or have received the services. One of the primary strengths of the CBPIR contracts are the various services that focus specifically on prevention services. CBCAP supported services within the CBPIR contracts include both primary and secondary prevention services. For the primary prevention component of CBPIR, the contract providers are expected to promote and increase child abuse prevention awareness in their local communities through activities such as active participation in community-wide public awareness events and campaigns, educational presentations, and coordinating at least three child abuse prevention awareness events each year with at least one occurring in April. The contract providers had to quickly make changes to their April 2020 events due to the COVID-19 related State of Public Health Emergency order issued by Governor Michelle Lujan Grisham. The PSD Prevention Unit is beginning to conduct site visits remotely of the CBPIR contract providers and will gather and evaluate the data collected during that process that will assist the Prevention Unit in identifying what worked well overall and what areas are needing improvement regarding the primary and secondary prevention services supported through CBAP and the FSS placement prevention services supported through PSSF. As a result, the Prevention Unit will be able to identify specific areas the contract providers' need additional training, support and/or technical assistance.

Child Protective Services Intake

It is New Mexico state statute that all New Mexican citizens are mandatory reporters of child abuse and neglect. All reports of child abuse and neglect are received and screened by the Protective Services Department's (PSD) statewide central intake (SCI). Any person can make a report of child abuse and neglect through the use of the statewide toll free number or #SAFE (#7233) from a cell phone. The toll-free line has the capacity for callers in both English and Spanish, as well as separated lines for law enforcement and the Juvenile Justice Services (JJS) staff. SCI intake workers respond to calls 24 hours a day, seven days a week. The intake worker utilizes the SDM screening tool, response priority tool and report staffing to determine prioritization of each call that SCI receives. The use of these tools helps intake workers to

determine if the call should be screened in for and investigation or if the call should be screened out.

If a report is accepted and determined an investigation is warranted, the intake worker sends the PSD report to the appropriate county office for investigation. The intake worker also assigns a prioritization: Emergency (E), Priority 1 (P1) or Priority 2 (P2).

If the report is screened out, no action is taken by PSD. Reasons for non-acceptance (or a screen out) of a report may include, but is not limited to:

- No specific allegation or risk of abuse or neglect;
- insufficient information to investigate;
- referral to another agency;
- does not meet SDM screening criteria;
- perpetrator is not a parent or caretaker;
- referral to law enforcement;
- the report is screened out due to the Comprehensive Addiction and Recovery Act (CARA) of 2016; or
- it is a duplicate report.

Figure 1. Total Reports: This graph illustrates that total number of reports of abuse from 2012 through 2019 in New Mexico:

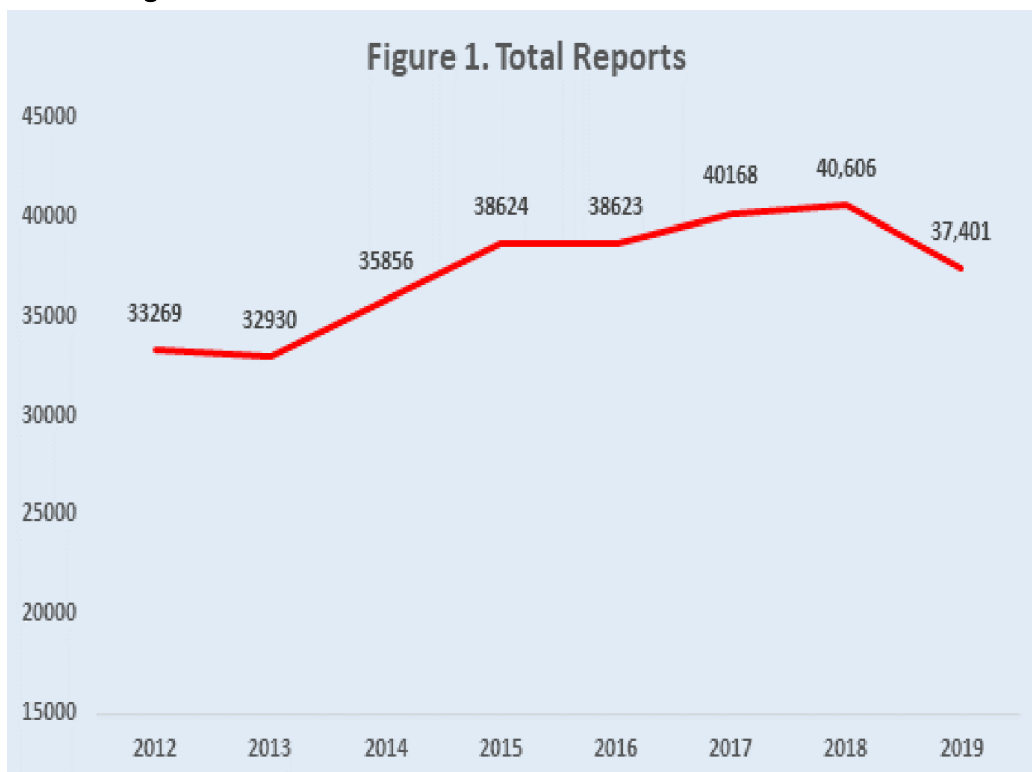


Figure 2. Accepted/Screened-In: This graph illustrates the total number of accepted reports from 2012 through 2019:

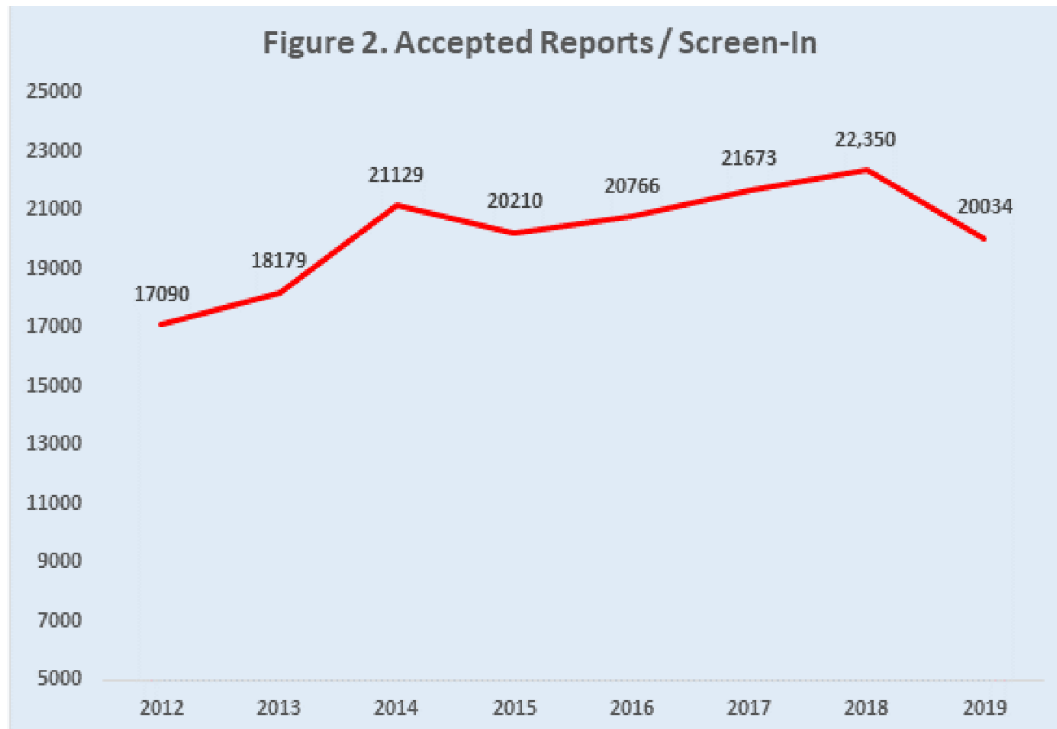
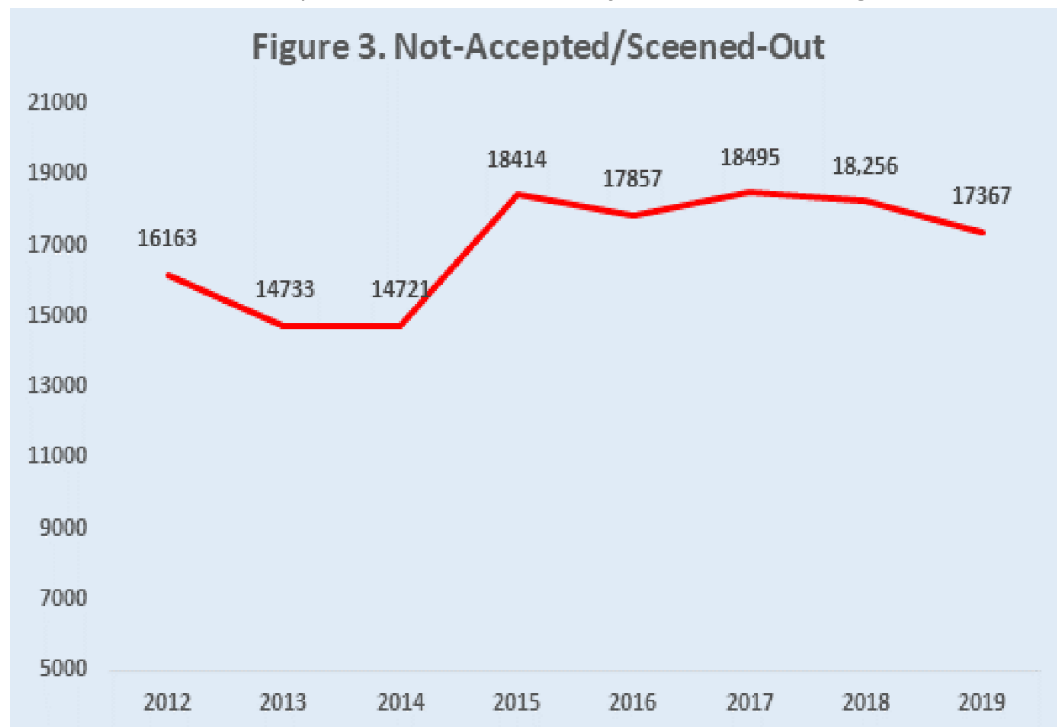


Figure 3. Not Accepted/Screened-Out: This graph illustrates the total number of reports that were not accepted or screened out from 2012 through 2019:



Child Protective Service Investigations

Once the county office receives the report from SCl, depending on the prioritization, an investigator is assigned and initiates the investigation. Emergency (E) reports are initiated within three hours from the acceptance of the report at SCl, Priority 1 (P2) reports within 24 hours, and Priority 2 (P2) reports within five calendar days. PSD is responsible for conducting civil investigations of child maltreatment, while law enforcement is responsible for conducting criminal investigations. PSD county offices collaborate with local law enforcement when it is warranted.

Investigations are conducted by investigation workers in each county field office. The investigation decision, due within 45 days of the report, includes a determination of substantiation or un-substantiation of each allegation in the report. Substantiation of an allegation in a child abuse or neglect investigation means the child is under the age of 18, a parent/guardian/custodian has been identified as the perpetrator or identified as failing to protect the child, and credible evidence supports the conclusion by the investigation worker that the child has been abused or neglected. Unsubstantiated means the information collected during the investigation does not support a finding that the child was abused or neglected as defined by state statute in the New Mexico Children's Code.

Medical, mental health and other related professionals are used, as appropriate, to assess the safety of the child and to determine needs of the family. The investigation workers also utilize standardized safety and risk assessment tools to determine what actions, if any, should be taken by PSD. Children under the age of three who are subject of a substantiated report of child maltreatment, whether or not they enter PSD custody, are referred to the state's early intervention program or Family Infant Toddler (FIT) program.

By state law, only law enforcement can remove a child from the home without the order of the court. As part of a set of amendments passed by the 2009 legislature, the state's Children's Code requires law enforcement to contact PSD prior to placing a child into custody. Once law enforcement contacts PSD, the investigation worker conducts an on-site safety assessment to determine if protective custody is appropriate. In addition, the law now clarifies that PSD may release a child from custody within the two-day emergency temporary custody time period if it is determined that release is appropriate.

Figure 1. Protective Services Investigations FY 2012-FY2019: The graph illustrates the number of statewide investigations results from FY 2012 through FY 2019.

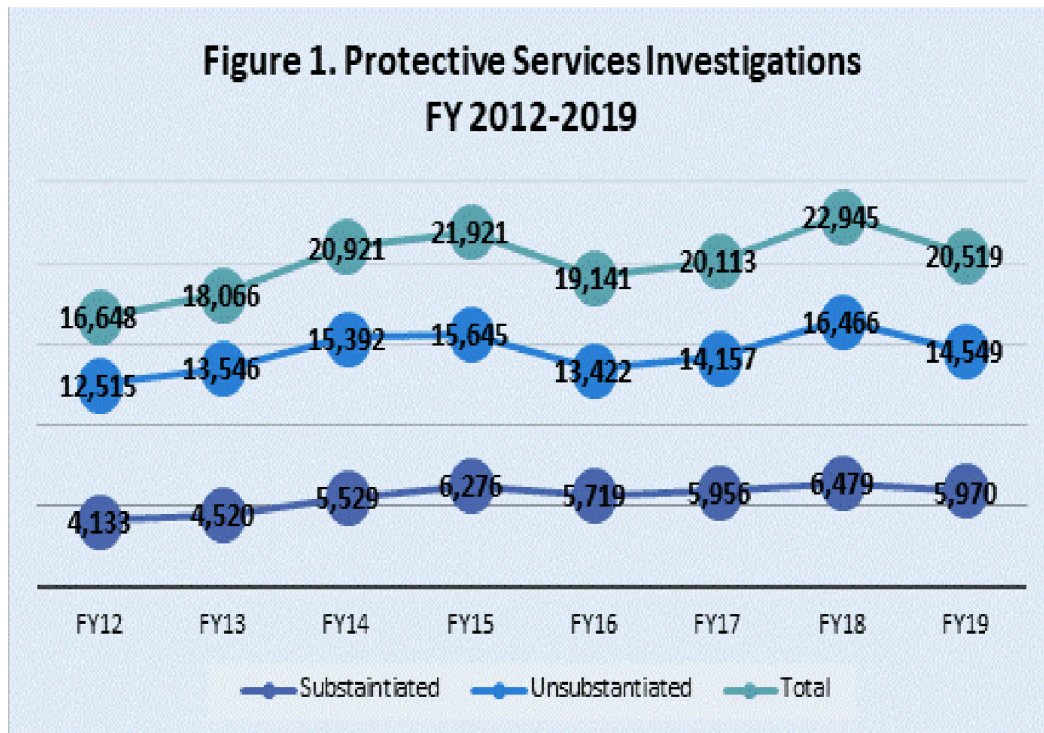


Figure 1. Investigations State Fiscal Year 2019. This table illustrates the number of accepted report, substantiated and unsubstantiated investigations, and child victims across the state.

County	Physical Abuse					Sexual Abuse					Physical Neglect					Total Allegations				
	Substantiated		Unsubstantiated		Total	Substantiated		Unsubstantiated		Total	Substantiated		Unsubstantiated		Total	Substantiated		Unsubstantiated		Total
	N	%	N	%		N	%	N	%		N	%	N	%		N	%	N	%	
Bernalillo W	754	19.8%	3052	80.2%	3806	88	24.5%	271	75.5%	359	2675	28.0%	6870	72.0%	9545	3517	25.7%	10193	74.3%	13710
Catron	0	n/a	0	n/a	0	0	n/a	0	n/a	0	0	n/a	2	n/a	2	0	n/a	2	n/a	2
Chaves	83	20.1%	329	79.9%	412	5	11.6%	38	88.4%	43	427	31.5%	927	68.5%	1354	515	28.5%	1294	71.5%	1809
Cibola	32	22.2%	112	77.8%	144	3	37.5%	5	62.5%	8	112	25.8%	322	74.2%	434	147	25.1%	439	74.9%	586
Colfax	36	36.0%	64	64.0%	100	0	0.0%	8	100.0%	8	78	26.5%	216	73.5%	294	114	28.4%	288	71.6%	402
Curry	46	14.6%	268	85.4%	314	5	20.0%	20	80.0%	25	179	21.7%	644	78.3%	823	230	19.8%	932	80.2%	1162
De Baca	1	14.3%	6	85.7%	7	0	n/a	0	n/a	0	16	53.3%	14	46.7%	30	17	45.9%	20	54.1%	37
Dona Ana	244	16.9%	1202	83.1%	1446	31	19.5%	128	80.5%	159	802	22.0%	2848	78.0%	3650	1077	20.5%	4178	79.5%	5255
Eddy	41	10.6%	347	89.4%	388	10	19.2%	42	80.8%	52	201	18.4%	893	81.6%	1094	252	16.4%	1282	83.6%	1534
Grant	41	18.8%	177	81.2%	218	1	6.7%	14	93.3%	15	217	29.8%	512	70.2%	729	259	26.9%	703	73.1%	962
Guadalupe	16	34.0%	31	66.0%	47	0	0.0%	1	100.0%	1	28	26.2%	79	73.8%	107	44	28.4%	111	71.6%	155
Harding	1	n/a	2	n/a	3	0	n/a	0	n/a	0	0	n/a	6	n/a	6	1	n/a	8	n/a	9
Hidalgo	14	42.4%	19	57.6%	33	1	n/a	2	n/a	3	29	27.1%	78	72.9%	107	44	30.8%	99	69.2%	143
Lea	67	16.8%	333	83.3%	400	11	20.8%	42	79.2%	53	282	25.9%	808	74.1%	1090	360	23.3%	1183	76.7%	1543
Lincoln	38	28.1%	97	71.9%	135	3	37.5%	5	62.5%	8	125	34.2%	240	65.8%	365	166	32.7%	342	67.3%	508
Los Alamos	10	18.2%	45	81.8%	55	1	33.3%	2	66.7%	3	19	17.6%	89	82.4%	108	30	18.1%	136	81.9%	166
Luna	44	20.7%	169	79.3%	213	7	28.0%	18	72.0%	25	175	30.2%	404	69.8%	579	226	27.7%	591	72.3%	817
McKinley	91	33.8%	178	66.2%	269	3	18.8%	13	81.3%	16	287	37.6%	476	62.4%	763	381	36.4%	667	63.6%	1048
Mora	7	n/a	10	n/a	17	0	n/a	4	n/a	4	19	n/a	45	n/a	64	26	n/a	59	n/a	85
Otero	114	25.4%	334	74.6%	448	10	21.3%	37	78.7%	47	210	19.4%	874	80.6%	1084	334	21.2%	1245	78.8%	1579
Quay	10	13.3%	65	86.7%	75	1	25.0%	3	75.0%	4	61	38.6%	97	61.4%	158	72	30.4%	165	69.6%	237
Rio Arriba	83	33.9%	162	66.1%	245	5	20.8%	19	79.2%	24	314	39.4%	483	60.6%	797	402	37.7%	664	62.3%	1066
Roosevelt	22	19.1%	93	80.9%	115	1	9.1%	10	90.9%	11	40	13.6%	254	86.4%	294	63	15.0%	357	85.0%	420
San Juan	169	20.9%	641	79.1%	810	11	15.5%	60	84.5%	71	571	26.8%	1556	73.2%	2127	751	25.0%	2257	75.0%	3008
San Miguel	84	37.2%	142	62.8%	226	1	5.6%	17	94.4%	18	196	30.2%	454	69.8%	650	281	31.4%	613	68.6%	894
Sandoval	71	9.3%	689	90.7%	760	4	8.5%	43	91.5%	47	255	14.6%	1497	85.4%	1752	330	12.9%	2229	87.1%	2559
Santa Fe	118	18.5%	520	81.5%	638	6	9.2%	59	90.8%	65	436	27.6%	1146	72.4%	1582	560	24.5%	1725	75.5%	2285
Sierra	24	19.5%	99	80.5%	123	2	10.5%	17	89.5%	19	73	21.5%	267	78.5%	340	99	20.5%	383	79.5%	482
Socorro	40	27.0%	108	73.0%	148	3	37.5%	5	62.5%	8	201	36.9%	343	63.1%	544	244	34.9%	456	65.1%	700
Taos	47	15.6%	255	84.4%	302	2	15.4%	11	84.6%	13	260	32.7%	534	67.3%	794	309	27.9%	800	72.1%	1109
Torrance	30	21.4%	110	78.6%	140	2	33.3%	4	66.7%	6	100	29.1%	244	70.9%	344	132	26.9%	358	73.1%	490
Union	12	52.2%	11	47.8%	23	0	n/a	0	n/a	0	24	33.3%	48	66.7%	72	36	37.9%	59	62.1%	95
Valencia	162	32.8%	332	67.2%	494	9	22.0%	32	78.0%	41	330	24.7%	1007	75.3%	1337	501	26.8%	1371	73.2%	1872
State Totals	2552	20.3%	10002	79.7%	12554	226	19.6%	930	2188.9%	1156	8742	26.5%	24277	73.5%	33019	11520	24.7%	35209	75.3%	46729

In-Home Services

Depending on the outcome of an investigation decision, an investigation worker may refer the family to PSD's In-Home Services (I-HS) program. I-HS is a prevention services offered through PSD. The purpose of I-HS is to promote safety of children and reduce the risk of the recurrence of maltreatment by their parents, guardians or custodians without the intervention of the court system. These services are designed to enhance the family's capacity to provide for their children's needs in a safe environment, create stability within the home and develop healthy and supportive ongoing community relationships. I-HS is an integrated, comprehensive approach to strengthening and preserving families who are at risk for, or who are currently experiencing struggles in family functioning. I-HS case interventions are provided for a maximum of 180 days

with a possibility of up to three 45 day extensions. PSD continues to look at ways to evaluate I-HS effectiveness and determine if changes need to be made to current practice. In 2019, PSD started collaborating with Center for States to develop a plan to adopt an evidenced-based I-HS program. It is expected to revamp the program by 2021/2022.

Foster Care

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

- Entry into Custody: A child can enter PSD custody through emergency placement by law enforcement, however an abuse/neglect petition must be filed with the district court within two business days of custody or the child will be returned to the parent, guardian or custodian. PSD is responsible in making reasonable efforts to prevent the removal of a child from their home, however, the child's safety always takes precedence. When a child enters into foster care, PSD must make reasonable efforts to reunify the child with their parent, guardian, or custodian.
- Permanency Planning Services: Permanency planning services include services needed to support the parent, guardian or custodian to manage the safety and risk factors identified during removal of the child. PSD establishes a permanency plan for every child in PSD custody and their caregivers. Reunification is the initial plan each child, but may change depending on the case. Other acceptable plans are adoption, permanent guardianship, placement with a fit and willing relative, and other planned permanent living arrangement.
- Level of Care: Children's needs are assessed upon entry into foster care to determine an appropriate level of care. The child's level of care determines the maintenance payment amount the resource family receives, identifies the needs of the child, the skill level of the resource family and provides an initial assessment of the needs of the resource family. All children enter foster care as a level 1 placement. Children who have a higher level of need than the general population of children in out of home care and who also require a higher level of supervision and skill by the resource family are eligible for level 2 foster care. Level 3 foster care are for those children with significant medical or behavioral needs who require a significantly and consistently higher level of care from a highly trained caregiver. These are children who would otherwise require hospitalization or institutional placement. Within the next year or two, PSD will be changing their needs

assessments to utilize the CANS assessment. The CANS assessment will help determine level of care of each child that enters into the foster care system.

- Health Care: Children who are legal residents of the United States in out-of-home care are eligible for Medicaid, either through Title IV-E eligibility, SSI or state-funded care. Medical care is provided for children who are non-citizens through state funds. Children receive early periodic screening diagnostic and treatment (EPSDT) assessment within the first 30 days of placement; this begins the process to identify any needs they have and begin early intervention. Caseworkers record health care information in FACTS, the state SACWIS system, and work with the resource family to maintain the child's traveling file to provide for continuity of health care information should the child change placement or exit foster care. Youth emancipating from foster care are provided copies of their health care records.
- Representation and Advocacy: For every legal custody case, the parent, guardian or custodian is appointed an attorney. Every child is appointed a youth attorney or a guardian ad litem (GAL). Children under the age of 14 are appointed a GAL who represents the best interest of the child. Older youth have a youth attorney who represents the position and wishes of the child. Many children are assigned a court appointed special advocate (CASA), who acts as an advocate for the child and reports on the status of the child to the judge at review hearings. New Mexico has a citizens review board (CRB) system, and boards around the state conduct reviews of legal custody cases on a periodic basis.
- Resource Families: PSD recruits, trains, licenses, and supports resource families for placement of children in foster care. There is an emphasis on placements with relatives with policy that directs relative placement options be considered throughout the life of the case. Both relative and non-relative foster care applicants are required to complete the same set of licensing criteria, including a criminal records check, training, a home safety check list, and a mutual assessment process to identify the strengths of the applicant and their appropriateness for caring for children in state custody. PSD policy and procedure detail the requirements for local, state and federal criminal record checks for applicants. Criminal background checks and abuse and neglect checks are also required for any adult residing in the home of the applicant. PSD provides foster care maintenance payments to resource families as financial reimbursement for the care of children placed in their home. Maintenance payments are supported by both general funds and Title IV-E funds.

Figure 1. Children in Care by Month (Snapshot): This chart shows children in care statewide by month FY 2015 – FY 2019

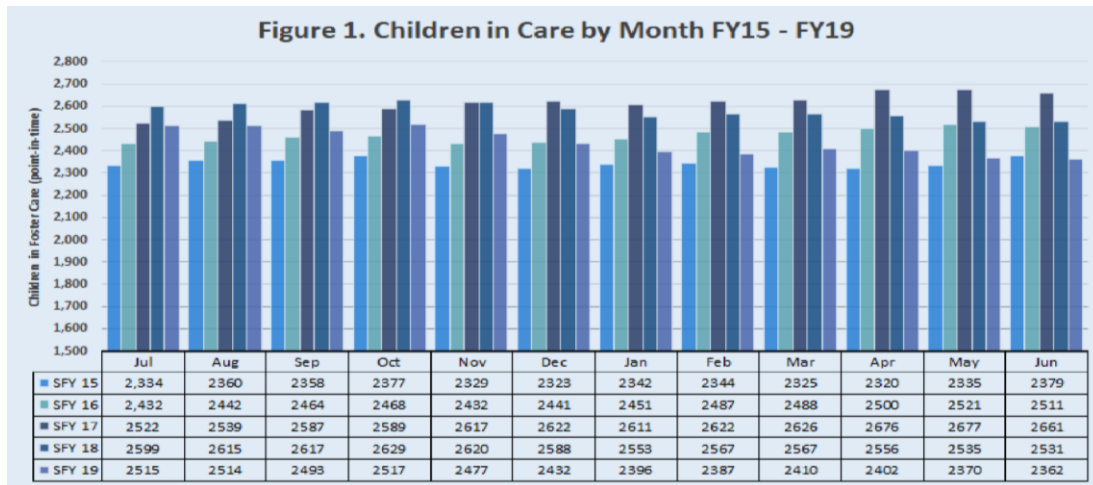


Figure 2. Average Number of Children in Care: This table illustrates the average number of child in care by type from FY 2015 through FY 2019.

FIGURE 2. PLACEMENT TYPES OF CHILDREN IN CARE AT THE END OF SFY2019					
	FY15	FY16	FY17	FY18	FY19
Foster Care	1430	1479	1457	1399	1342
Foster Care Relative	468	513	653	586	539
Trial Home Visit	159	157	180	165	139
Pre-Adoptive	107	105	113	99	81
Group Home	53	62	66	67	51
Facility	92	108	107	131	118
Supervised Independent Living	9	9	3	7	4
Runaway	32	41	44	45	48
Guardianship (Relative)	0	0	0	0	0
Community Home	15	14	11	9	16
Detention	0	0	0	5	3
Protective Supervision	0	0	0	0	0
Other	14	20	27	18	21
Total	2379	2508	2661	2531	2362

Adoption Promotion and Support

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

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

PSD continues to utilize the Structured Analysis Family Evaluation (SAFE) home study process throughout the state. The SAFE home study process, which includes an extensive psychosocial assessment of all household members of a prospective foster and adoptive resource family, is intended to result in a more comprehensive evaluation of family functioning and more safe and a stable placement options for children. PSD and Consortium for Children entered into a contractual agreement in 2018 to provide Structure Analysis Family Evaluation (SAFE) training to PS staff and private providers.

PSD continues its multi-year contract with La Familia-Namaste, Inc. to provide home study services statewide for the agency. The population being served are families or individuals interested in adopting children in CYFD custody. This agency services only families identified and referred to the agency by CYFD.

In FY19, 207 families were referred to the statewide agency to conduct home studies.

PSD continues it's a new multi-year contract with La Familia-Namaste to provide post-decree family support services for adoptive families. The FIESTA program included family activities, education, support groups, a warm line and training, networking and social opportunities for adoptive parents and specialized training in adoption competence for therapists and mental health professionals who provide therapeutic services to PSD families. Information is available to adoptive families statewide through a lending library of books, videos and DVDS. The contractor provides social media as another opportunity for parents to network on-line. Adoptive parent family contacts reside in and serve each of the five PSD regions and are responsible for coordinating activities and running the warm line.

FIESTA Contract Requested Numbers
Submitted by All Faiths CAC

	FY19(small contract)	FY20 (Excluding May & June)	Total
● Total Participant Families (Unique):	72	147	207
● Total Participant Families (Attendance Count)	77	255	262
● Total Child Participants (Unique):	68	215	262
● Total Child Participants (Attendance Count)	73	332	405
● Total New Families:	78	134	212
● Total Social Media participants:	1,450 highest total from 6 FB groups(March '19) 1,315 total from 3 groups(June '19 after closing out 3 groups that with little activity)	1328 highest	
● Lending Library:	5 Lent Items	18 Lent Items	23 Lent Items
● Warm line:	6 Calls	24 Calls	30 Calls

In FY19, the FIESTA program served the following:

- Total Participant Families: 207
- Total Child Participants: 262
- Total New Families: 212
- Total Social Media participants: 1,450
- Lending Library: 23
- Warm line: 30

Heart Gallery of New Mexico

About the Heart Gallery of New Mexico

In any given year, an average of 500-600 children and youth in New Mexico who are under age 18 may need additional support identifying a permanency resource. The Heart Gallery of New Mexico continues to educate the community about the need for permanency resources for children, young people and sibling groups in New Mexico. Currently, the project utilizes a website (<http://heartgallerynm.org>), a partnership with Adopt US Kids (<http://adoptuskids.org>) and 40 digital displays including video, audio and static photographs designed to raise awareness of the permanency needs of children and young people who are involved in New Mexico's Children, Youth & Families Department (CYFD).

Strategy

Beginning in January 2020, a comprehensive plan was developed to gain a better understanding the needs of young people in New Mexico from their voices and perspective, and how the Heart Gallery project and resources can best be leveraged to serve those needs.

A scan of national best practices and projects developed by other state and nonprofit groups that incorporate youth advocacy, voice and vision in permanency initiatives is guiding CYFD's work with the Heart Gallery. This year, CYFD will hold focus groups with NM youth to identify specific strategies for ensuring the Heart Gallery of New Mexico both addresses needs and creates opportunities for young people. The findings will help to shape the work of the Heart Gallery moving forward to ensure that our youth are the deciding stakeholders in their own permanency journeys.

COVID-19 Interruption

In early March 2020, New Mexico declared a State of Emergency around the Covid-19 Pandemic. This necessitated a redirection of immediate resources and placed planned events on hold to support public health initiatives.

Pivoting Introduction & Recruitment Events to Virtual Events

New Mexico's first Virtual Child/Youth Introduction Event is planned to take place on June 11th for Region 5 of New Mexico, the Southern Las Cruces Region. A Zoom meeting, held by the local Adoption Navigators, Placement Workers and Adoption Consultants will present information about children, youth and sibling groups awaiting permanency. Video testimonials from successfully matched youth and families will provide insight into what families can expect as they move forward with fostering children in need of permanency. Information about post-adoption support services will also be provided. Approximately 30 fully licensed, home studied families who have signed appropriate confidentiality agreements will participate in this event. The virtual meeting will be safeguarded by identifying only registered participants and gated once the meeting commences.

This virtual event model will be rolled out to the other four regions and fine-tuned as necessary to meet the needs of resource family recruitment as we navigate our new normal.

Heart Gallery Statistics

- In the calendar year 2019, the Heart Gallery generated 613 inquiries, with an average of 50 inquiries per month.
- In January-April of calendar year 2020, the Heart Gallery generated 249 inquiries, averaging 62 per month.
- In the first quarter (January-March) of calendar year 2020, the Heart Gallery facilitated 21 photography requests.
- In the period July-December 2019, the Heart Gallery facilitated 31 photography requests.

Services for Children Adopted from Other Countries (section 422(b)(11) of the Act)

PSD utilized FFY18 AFCARS data in 2019 to identify children who experienced a dissolution by utilizing the removal reasons of abandonment and dissolution. Based on the research, no children with a dissolution were identified as having been adopted through an intercountry adoption. PSD also conferred with the private adoption agencies in New Mexico. The agencies indicated they did not serve any children at risk of disruption or dissolution involved in intercountry adoptions during Fiscal Year 2019.

In 2020-24, All Faiths will continue to provide post-adoption services in New Mexico. Families participate in the statewide events and many more participate in discussions or forums on the FIESTA Facebook page. The FIESTA program is available and accessible to all adoptive families including children and families adopted from other countries. During FY18, FIESTA provided services to children adopted from other countries, but none of the children served had disrupted from their adoptive placements.

CYFD Protective Services Division (PSD) does not have a specific policy on rehomeing of adopted children. If an intercountry adoptive family calls into statewide central intake for assistance, they are referred like all families for services appropriate to their situation. As with any adoptive family in New Mexico, inter-country adoptive families have access to post-adoption services through the FIESTA program funded by CYFD. PSD also continues to partner with the Adoption Alliance Network, adoption agencies certified by CYFD, certified counselors, and investigators to educate them on the requirement to provide services to families who have adopted children from other countries to ensure the network is up to date with the processes.

The Foster Care and Adoption Bureau through the newly hired Foster Care Manager will continue to work with the Research, Assessment and Data Bureau and the Federal Reporting Bureau, to develop a statewide procedure to identify children in care involved in an inter-country adoption and disruption or dissolution, to include the agency that handled the adoption, plan for the child and reasons for the disruption or dissolution. PSD will reach out on a quarterly basis to the adoption agencies, certified counselors and any requests coming through the ICPC/NEICE systems to inquire and attempt to track the number of intercountry families that come to their attention for reporting. If an intercountry adoptive family comes to the attention of CYFD as being in crisis or in the process of a dissolution or disruption, a referral notification will be made with the family's name, child's name, number of children, name of the agency that handled the adoption, plans for the child as available, and the reason for the disruption or dissolution to the Council on Accreditation (COA) at 212-797-3000 or haguecompliance@coanet.org and to the Department of State at adoptionusca@state.gov.

PSD will work with our information system to determine the best method to capture the data will be with inter-country adoptive families come to the attention of CYFD. PSD will encourage

adoption agencies and certified counselors/investigators to track the number of families that come to their attention for reporting purposes.

Services for Children Under the Age of Five (section 422(b)(18) of the Act)

Over the past few years, PSD has initiated several practices to improve our ability to target services to those most at risk. This effort is most evident in terms of Promoting Safe and Stable Families (Title IV-B, Part 2) services and the PSD's safety management practice. Beginning last project year and continuing this year, in accord with the federal focus on services to children under age five (New Mexico's focus is five and under), family support services are provided to parents and secondary caregivers who have a child age 0 to 5 who is at risk of abuse or neglect. Family support services are intended to work with families at risk of child maltreatment. Children under the age of three who are subject of a substantiated report of child maltreatment, whether or not they enter PSD custody, are referred to the state's early intervention program, Family Infant Toddler (FIT), for an assessment.

The Community Based Child Abuse Prevention (CBCAP) programs continue to provide home-based and evidence-based prevention services to families with children ages 0 to 5. Preliminary data for FY 18 shows that there is a low repeat maltreatment rate for families who engage in the CBCAP programs.

Several additional efforts are underway to target enhanced services to this age group:

- Family Support Services: In an effort to target services to those at most risk, during the coming year family support services will be prioritized for parents and secondary caregivers who have a child age 0 to 5 who is at risk of abuse or neglect.
- Early Intervention: Children under the age of 3 who are the subject of a substantiated report of child maltreatment are referred to the state's early intervention program, Family Infant Toddler (FIT), for an assessment.
- Early Childhood Education and Care Department's early care, education and nutrition division: Infants and children in PSD custody or at risk of coming into custody are often eligible for a range of services provided through ECECD's early care, education and nutrition division and its contractors, including home visiting, infant mental health, early intervention, child and family nutrition, childcare, and NM PreK.
- Infant Mental Health Teams: PSD is partnering with providers in pilot sites within the state to enhance the state's workforce capacity (providers, PSD staff and foster parents) for the provision of infant mental health services. PSD is working with the Early Childhood Division to identify more pilot sites and increase the use and understanding of home visiting services in the state.

- Neurosequential Model of Therapeutics: PSD staff and foster parents have received training on the neurosequential model of therapeutics. This model is an approach that integrates core principles of brain development and the impact of trauma, and has three components: training and capacity building, assessment and then, recommendations. The training and capacity building component has occurred for approximately 30 individuals.

Other efforts to provide services for children under the age of five to New Mexico include:

- The “At-Risk” Childcare program, which provides free childcare to families whose children are at risk of child maltreatment or repeat child maltreatment;
- Relative guardianship assistance provided to families to prevent kids from lingering in foster care;
- Child and adult food care program at child care facilities and at high risk locations such as WIC offices, medical clinics and Child Support Enforcement offices;
- Neonatal Intensive Care Home Visiting Services Project for children and families began in July 2017 through Early Childhood Services Division;
- Use of wrap around services to families and children to prevent children coming into foster care;
- Home visiting program, a program in which a provider visits new parents and infants in their homes;
- Access to Infant Mental Health Teams around the state; and
- Enacting CARA state law to offer supportive services to newborns born substance exposed and their family.

CYFD PSD continues to focus prevention services to families with children ages birth to five using CBCAP funding. The CBPIR contract providers will soon complete the first year of the new contracts and the PSD Prevention Unit has begun to schedule site visits in order to evaluate both the successes of the contracts as well as areas that need improvement and/or additional supports such as training and technical assistance. The Prevention Unit does, however, regularly monitor the contracts by reviewing monthly contractor reports, monitoring contract provider caseloads and maintaining communication through phone calls and emails. In addition, Prevention Unit staff support the work by hosting and facilitating Peer to Peer calls and held the most recent one using a video platform due to the COVID-19 related State of Public Health Emergency order issued by Governor Michelle Lujan Grisham. The next Peer to Peer call will also likely be held remotely. During site visits, the Prevention Unit will also review client files, fiscal and employee files and conduct interviews with provider staff, PSD field staff and families whenever possible. At the completion of the first full year of the CBPIR contracts, the Prevention Unit, along with the assistance of the PSD Research, Assessment and Data Bureau, will evaluate each contract provider on the following performance measures:

1. 90% of families served will not be the subject of substantiated child maltreatment while receiving services and within six months of close of service.

2. 80% of all parents/caregivers receiving services will score higher on the Protective Factors Survey at the end of the intervention than they did at the beginning of the intervention.
3. 80% of families served in each fiscal year will complete an evidence based/informed parenting curriculum.

CYFD PSD and the Prevention Unit in particular will ensure the providers receive programmatic support, training and/or technical assistance when program deficiencies are identified in an effort to assist the contract providers in being successful in service provision.

Efforts to Track and Prevent Child Maltreatment Deaths

CYFD reports Serious Injuries via NCANDS reporting annually. This data is currently collected through SCI reports alleging serious injuries to a child. CYFD participates in the DOH lead Child Fatality Review Board (the board includes multi-disciplinary, cross agency participation with the OMI, DOH, and Law Enforcement) CYFD has access to the data collected from the OMI and DOH regarding child fatalities. Internally, the Research, Assessment, and Data (RAD) Bureau conducted a comprehensive quantitative review of all child fatalities in the state that occurred within the last decade to determine the extent of CYFD involvement with families in which a child fatality occurred. Those data have been reviewed on a preliminary basis with PSD leadership. The leadership team identified several key practice areas to target for prevention initiatives, including training staff to assess youth suicide risk; better assessment of cases where chronic drug use is indicated; and more robust intervention with families in which there is history of domestic violence.

As noted throughout this document, under new leadership, CYFD has established an unprecedented level of collaboration with other New Mexico state agencies, including the Department of Health. CYFD and DOH jointly participate in a Child Fatality Review Team that is multi-disciplinary, and is conducting a deep dive on all child fatalities during the past ten years. This information is being utilized to develop a comprehensive plan that will address any necessary changes to policies and procedures, and will support CYFD in targeting prevention efforts to particular geographies and particularly vulnerable populations. The Team has begun to outline a comprehensive plan, which is under review as of this writing.

Also, as noted elsewhere, CYFD is in the process of implementing a Structured Decision Making tool that includes a more robust assessment of strengths and risk factors, and is intended to support the Department in better evaluating risk and targeting appropriate supports and services.

MaryLee Allen Promoting Safe and Stable Families (PSSF) (title IV-B, subpart 2)

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

Contracts are issued through a competitive procurement process. The request for proposal (RFP) requires that all agencies be community based providers. PSD staff located statewide serve as the evaluators for the RFP evaluation committee; they make recommendations for awards after evaluating the submitted proposals. CYFD then awards the contracts to the community based agencies determined to be the most qualified to deliver the service.

As noted above, CYFD recently consolidated services that had been provided through PSSF and CBCAP funding to create region based contracts that address a broad range of service needs. CYFD recognizes that there will be a period of adjustment as staff learn the new program requirements. The implementation of the new PSSF program will coincide with the statewide roll out of the Safety Organized Practice Model, including the new safety assessment. As a result, staff will need additional technical support as they begin implementing the combined PSSF contract. The Community Services Bureau will collaborate with NCCD to provide an initial orientation to staff and will provide ongoing technical assistance to ensure quality outcomes.

The service elements that have been combined into this new structure are the following:

Family Support

Family Support Service (FSS) are provided to parents or primary caregivers to prevent child maltreatment. Families with a children who are at risk of child abuse and neglect who have been referred by PSD are eligible for these services, and families that have had 3 or more investigations with PSD are given priority. FSS are intended to be intensive home-based services focused on providing support to eligible families and enhancing child and family well-being. Service elements may include:

- Home visits
- Information and referral
- Crisis intervention
- Evidence-based parent education curriculum

- Parent support visits
- Life skills training and coaching
- Education and training
- Mentoring
- Transportation

Short term (60 days) case management is provided to link families with appropriate services and provide one-on-one evidence-based parenting training. Service providers are allowed to extend services up to 90 days with supervisor approval if appropriate to address safety concerns.

As previously noted, CYFD PSD consolidated the contracted services supported through CBCAP and PSSF funding into the Community Based Prevention, Intervention and Reunification (CBPIR) contracts. These contracts are approaching the completion of the first year since being executed. The PSSF Family Support Services (FSS) funded component of the CBPIR contracts focuses on placement prevention and are available in the following 25 counties: Chaves, Colfax, Union, Dona Ana, Luna, Sierra, Otero, Lea, Hidalgo, So. Catron, Grant, Quay, Harding, Santa Fe, Rio Arriba, Taos, Sandoval, Valencia, No. Catron, Socorro, McKinley, San Juan, Torrance, Cibola and Eddy. PSSF FSS is designed to safely maintain children in their home. Contractor providers use the information they gather during the warm hand-off, from the family members and a comprehensive assessment to determine the level of case management most appropriate for the family's needs. Families who can be considered for PSSF FSS include those who have unsubstantiated or substantiated cases of child abuse and/or neglect, and are in need of support and case management services in order to prevent child maltreatment. Eligible families include relative and non-relative foster and adoptive families and referrals can be made by CYFD PSD and JJS staff, CYFD funded Home Visiting Level II programs, licensed childcare facilities, and New Mexico Pre-K providers; however, other referral sources can be considered and must be approved by CYFD. In addition, referrals made by PSD staff must be given priority by the contract providers. Families can receive PSSF FSS services for up to six months. The PSD Prevention Unit has been regularly monitoring the CBPIR contracts using monthly reports and caseload data; the unit staff have also started to schedule and conduct remote site visits of the CBPIR contract providers. During the site visits, the Prevention Unit will review client files, fiscal and employee files and conduct interviews with contract provider staff, PSD field staff and families whenever possible. At the completion of the first full year of the CBPIR contracts, the Prevention Unit, along with the assistance of the PSD Research, Assessment and Data Bureau, will evaluate each contract provider on the following performance measures:

1. 93% of families served will not be the subject of substantiated child maltreatment while receiving services and within six months of close of service.
2. 93% of families served will not have an entry into foster care while receiving services and within six months of close of case.

CYFD PSD and the Prevention Unit in particular will ensure the contract providers receive programmatic support, training and/or technical assistance when program deficiencies are

identified in an effort to assist the contract providers in being successful in service provision and improve outcomes of the families served.

Family Preservation

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

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

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

The consolidated CBPIR contracts also include the PSSF Family Preservation Services. As noted previously, these contracts are approaching the completion of the first year since being executed. The PSSF Family Preservation Services (FSS) component of the CBPIR contracts are referred to as Intensive Family Support Services (IFSS) and focuses on families who are in crisis, and need intensive, comprehensive supports and services in order to prevent child abuse and/or neglect while maintaining children safely with their family of origin. IFSS is available in the following 25 counties: Chaves, Colfax, Union, Dona Ana, Luna, Sierra, Otero, Lea, Hidalgo, So. Catron, Grant, Quay, Harding, Santa Fe, Rio Arriba, Taos, Sandoval, Valencia, No. Catron, Socorro,

McKinley, San Juan, Torrance, Cibola and Eddy. As with PSSF FSS, contract providers utilize the information they gather during the warm hand-off, from the family members and the assessment in order to determine the appropriate level of case management for the family. Families who can be considered for PSSF IFSS include those with unsubstantiated or substantiated cases of child abuse and/or neglect who are in need of intensive support and therapeutic services such as medical, behavioral and/or mental health in order to prevent repeat child maltreatment and the removal of the child(ren). Eligible families include relative and non-relative foster and adoptive families and referrals can be made by CYFD PSD staff or internal case transfers from PSSF Family Support Services. Families that have unsubstantiated cases of child abuse or neglect must have CYFD approval prior to contract providers enrolling the family into this level of service. Families can receive IFSS for up to nine months though they can discharge from the service as soon as they successfully complete their Family Plan and there are no safety concerns. A 60 day extension can be considered in order for the family to achieve the goals outlined in their Family Plan.

The PSD Prevention Unit has been regularly monitoring the CBPIR contracts using monthly reports and caseload data. The unit staff have also started to schedule and conduct remote site visits of the CBPIR contract providers. During the site visits, the Prevention Unit will review client files, fiscal and employee files and conduct interviews with contract provider staff, PSD field staff and families whenever possible. At the completion of the first full year of the CBPIR contracts, the Prevention Unit, along with the assistance of the PSD Research, Assessment and Data Bureau, will evaluate each contract provider on the following performance measures:

1. 93% of families served will not be the subject of substantiated child maltreatment while receiving services and within six months of close of service.
2. 93% of families served will not have an entry into foster care while receiving services and within six months of close of case.

CYFD PSD and the Prevention Unit in particular will ensure the contract providers receive programmatic support, training and/or technical assistance when program deficiencies are identified in an effort to assist the contract providers in being successful in service provision and improve outcomes of the families served.

Time-Limited Reunification

Time-limited reunification (TLR) services are provided to families whose children could not remain safely in the home and have been removed to foster care. Intensive services are intended to reunify families within an expedited time frame - no more than four months from the date of referral and within 12 months of the most recent removal from the home. Contractors are required to conduct at least one home visit per month for up to four months after PSD has closed the case in order to provide support services to the family. TLR services are available to families 24 hours a day, seven days a week. The services provided through TLR are multifaceted and may include the coordination of resources to support safety plans, the provision of

supervised and monitored visitation, parent education and skill building and monitoring when the child returns to the home.

PSD and its contractors also coordinate among ancillary support services provided by other divisions and state agencies such as childcare, substance abuse intervention, mental health intervention, and employment assistance in an effort to further support the reunification process.

In 2020-24 CYFD is expanding its reunification services to include children returning home from Foster Care or other out of home placements who are reunifying with their parents, other family members, or fictive kin, and anyone pursuing guardianship. In addition to this expansion, CYFD will maintain a focus on reunifying families in an expedited timeframe (less than 15 months) by retaining the TLR service model.

Another service component included in the consolidated CBPIR contracts is the PSSF Time-limited Reunification service. The PSSF Time-limited Reunification funded component of the CBPIR contracts focuses on placement prevention and are available in the following 26 counties: Bernalillo, Chaves, Colfax, Union, Dona Ana, Luna, Sierra, Otero, Lea, Hidalgo, So. Catron, Grant, Quay, Harding, Santa Fe, Rio Arriba, Taos, Sandoval, Valencia, No. Catron, Socorro, McKinley, San Juan, Torrance, Cibola and Eddy. The PSSF funded component of the CBPIR contracts focus on reunification services in order to help support the safe transition and return of children to their families of origin from out of home placement.

Families who participate in the Family Reunification Services (FRS) receive support that will assist them in the reunification process following out of home placement. Families with children who are returning home from foster care or other out of home placements as part of a reunification plan with their parents, other family members or fictive kin, and anyone pursuing guardianship can be considered for the service. If children are in a voluntary placement, Family Reunification Services should begin at least one month prior to reunification and may continue for up to six months thereafter. If children are in CYFD custody, Family Reunification Services should begin at least two to three months prior to the start of the Trial Home Visit and may continue for up to six months thereafter. A 60 day extension can be considered in order for the family to achieve the goals outlined in their Family Plan. Only CYFD PSD staff can make referrals to FRS.

Families who participate in Time-limited Reunification (TLR) services must meet the following two criteria in order to be considered for the service: 1) the child(ren) has been in CYFD custody for less than 12 months and 2) the Trial Home Visit will begin within four months from the TLR referral date. Families will receive intensive, home based services focused on supporting the family reunify with their child(ren). TLR services can include assisting the parents successfully engage and complete the items of their court ordered treatment plan in order to reunify the family in an expedited timeframe. Families can receive TLR services for up to 12 months following the date the child(ren) begin Trial Home Visit regardless of when the referral was made to the CBPIR contractor.

As noted in the previous sections, the PSD Prevention Unit regularly monitors the CBPIR contracts using monthly reports and caseload data and they have started to schedule and conduct remote site visits of the CBPIR contract providers. At the completion of the first full year of the CBPIR contracts, the Prevention Unit, along with the assistance of the PSD Research, Assessment and Data Bureau, will evaluate each contract provider on the following performance measures:

1. 93% of families served will not be the subject of substantiated child maltreatment while receiving services and within six months of close of service.
2. 93% of families served will not have an entry into foster care while receiving services and within six months of close of case.

CYFD PSD and the Prevention Unit in particular will ensure the contract providers receive programmatic support, training and/or technical assistance when program deficiencies are identified in an effort to assist the contract providers in being successful in service provision and improve outcomes of the families served.

Adoption Promotion and Support

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

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

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

PSD contracts with a statewide agency provides post-decree family support services for adoptive families. The FIESTA program includes family activities, education, support groups, a warm line and training, networking and social opportunities for adoptive parents and specialized training in

adoption competence for therapists and mental health professionals who provide therapeutic services to PSD families. Information is available to adoptive families statewide through a lending library of books, videos, and DVDs. PSD also sponsors a blog as another opportunity for parents to network on-line. The contract provides a quarterly newsletter for all adoptive parents. Adoptive parent family contacts reside in and serve each of the five PSD regions and are responsible for coordinating activities and running the warm line.

PSD continues to offer the annual Adoption Conference to all adoptive families and their children. In 2018, PSD contracted with La Familia-Namaste, Inc to coordinate the adoption conference. The conference allows adoptive families to meet other adoptive families and for parents to receive training on adoption related topics while their children are engaged in activities during the day. The theme for the 2018 Adoption Conference was "Connection First, Family Forever: A Deeper Look at TBRI." A total of 128 adoptive parents attended the conference. Evaluations indicated the topic was well received and families like trauma based training.

PSD continues its partnership with the Heart Gallery of New Mexico. The Heart Gallery of New Mexico offers small grants to children and families to support special needs of the family that may include training, camps, and or additional support. The Heart Gallery of New Mexico has been an invaluable resource for supporting PSD adoption recruitment efforts. Adoption Promotion and Support services are provided statewide and available in every county.

In 2020-24, PSD will continue to utilize the Structured Analysis Family Evaluation (SAFE) home study process throughout the state. The SAFE home study process, which includes an extensive psychosocial assessment of all household members of a prospective foster and adoptive family, is intended to result in a more comprehensive evaluation of family functioning and more safe and a stable placement options for children. PSD and Consortium for Children entered into a contractual agreement in 2018 to provide Structure Analysis Family Evaluation (SAFE) training to PS staff and private providers.

PSD will continues its multi-year contract with La Familia-Namaste, Inc to provide home study services statewide for the agency. The population being served are families or individuals interested in adopting children in CYFD custody. This agency services only families identified and referred to the agency by CYFD.

PSD will continue its multi-year contract with La Familia-Namaste to provide post-decree family support services for adoptive families. THE FIESTA program included family activities, education, support groups, a warm line and training, networking and social opportunities for adoptive parents and specialized training in adoption competence for therapists and mental health professionals who provide therapeutic services to PSD families. Information is available to adoptive families statewide through a lending library of books, videos and DVDS. The contractor provides social media as another opportunity for parents to network on-line. Adoptive parent family contacts reside in and serve each of the five PSD regions and are responsible for coordinating activities and running the warm line.

Service Decision Making Process for Family Support Services (45 CFR 1357.15(r))

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

Once the contract is awarded, the Community Service Bureau and Contract Development Unit negotiate final contract with the selected agency or organization.

PSD allocates 20% of PSSF funds for each of the four allowable services: Family Support Services, Family Preservation Services, Time-Limited Reunification Services and Adoption Promotion and Support. In addition, PSD allocates 10% of PSSF funds for administrative costs which include the salaries and operating costs of program managers who are administering the delivery of these services statewide. The remaining 10% is allocated for program support costs which includes training, evaluation, CQI, CFSR and staff recruitment and retention.

The continuum of services funded through the Title IV-B Subpart 2 Promoting Safe and Stable Families (PSSF) Program is complemented by other services provided to children, youth and families by PSD through state general funds and other funding sources.

The CYFD PSD Prevention, Placement and Adoption Resource (PPAR) Bureau procured the Community Based Prevention, Intervention and Reunification (CBPIR) contracts through a Request for Application process. Community based providers located throughout the state were asked to respond to an application for community based service providers that focus on the promotion of safety, stability and well-being of children and families using a tiered case management approach. Providers were also asked to respond to a series of questions and to submit a cost response addressing how they would provide ongoing home visits to families, coordinate with specialized service providers in areas such as mental health, substance abuse, domestic violence, education, employment, provide parent education, and assess the ongoing safety of children in the home. CYFD noted in the application that the department was prioritizing funding to applicants that were willing to serve the following priority communities: Catron, Chaves, Cibola, Colfax, Eddy, Lea, Grant, McKinley, Quay, Roosevelt, Sierra, Socorro, Torrance, and Union Counties and must propose to serve one of these counties in order for their application for funding to be considered. The questions applicants were required to respond to were as follows:

1. Describe and identify the specific/target population that you intend to serve in one of the priority communities. Describe your experience and expertise in serving the target

population. How many families do you intend to serve in each of the priority communities you are proposing? Provide any supporting data.

2. What non-priority communities, if any, does your agency intend to serve? Provide data to support the need for services in this community, including a description of other services available in that specific community. How will your agency ensure the needs of the priority community take precedence over the needs of the non-priority community?
3. Describe your ability to hire appropriate and qualified staff for this program. If staff are not currently employed by the agency, please provide an anticipated time frame needed to hire and train staff after contract execution. In an attachment, include job descriptions for all staff providing services in this program and indicate if each person is presently employed by the agency.
4. Describe the hours of operation that will ensure program participants have access to services (24 hours a day, seven days a week) during the evening, weekends and holidays. Describe your organizational plan for scheduling staff to ensure that 15% of all home visits are provided during non-traditional hours.
5. Describe how you will ensure that an appropriate warm hand-off is held within the time frame allowed. How will your program ensure that CYFD referrals are given priority over referrals from other sources?
6. Complete the Cost Response Form (completing this form does not count toward your page limit).

CYFD selected the following community based service providers for CBPIR funding based on their response applications and due to their well-established programs in their local communities: Chaves County CASA; Colfax County Youth Empowerment Services; Desert View Counseling Services; Families and Youth Inc.; Guidance Center of Lea County; Las Cumbres Inc.; Mesa Counseling; PB&J Family Services Inc.; Positive Outcomes Inc.; Youth Development Inc.; and Recovery Management Center.

The specific percentages of title IV-B, subpart 2 funds the state will expend on actual service delivery of family preservation, community-based family support, family reunification and adoption promotion and support services, and on planning and service coordination, with a rationale for the decision.

Populations at Great Risk of Maltreatment (section 432(a)(10) of the Act)

PSD recognizes children aged 0 to 5 years old as the population at greatest risk for maltreatment. The efforts detailed above seek to target services to this population and mitigate the risk of maltreatment.

PSD also recognizes Victims of Domestic Violence and Sexual Assault as being at significant risk for further maltreatment. The section above regarding coordination with VAWA funded programs details various collaborations that target services to this population.

Given the increased focus on older youth that will accompany the state's implementation of Extended Foster Care, PSD also intends to build out its services and supports for youth who are at risk of sexual exploitation. Over the coming year PSD staff statewide will be trained in the use of the CSE-IT validated Commercial Sexual Exploitation Identification Tool. CSE-IT is an evidence-based screening tool designed for use in multiple child-serving systems, including child welfare, juvenile justice, schools, residential, mental health, medical, and homeless services. The CSE-IT is used as part of a universal screening approach to systematically identify the presence of indicators of child sex trafficking. BHS is working with PS on the implementation of the training and when to administer it.

CYFD also recognizes youth experiencing homelessness as being at significant risk of maltreatment. The 2017 runaway and homeless youth report indicates that three quarter of homeless youth in New Mexico State that they cannot return home due to abuse or neglect.

LGBTQI youth are also understood by CYFD to be at significant risk of maltreatment, and they are disproportionately represented among homeless youth and those that attempt or commit suicide. As noted in the 2015-19 Final Report and elsewhere in this document, CYFD is currently reviewing and revamping its training, practices, and policies regarding support for LGBTQ youth.

CYFD PSD, BHS and ECS have continued to partner and collaborate in an effort to support those identified as being at greatest risk of maltreatment. The services and programs geared towards families with children between the ages of birth and 5 continue to focus on prevention service. Those include the CBCAP FSS component of the PSD CBPIR contracts as well as Infant Mental Health services, Child Care, Pre-K, Home Visiting and Family Infant Toddler (FIT) programs.

The services and programs geared towards serving Victims of Domestic Violence and Sexual Assault are largely administered, monitored and/or supported through the CYFD BHS Domestic Violence Unit. The DV Unit, PSD and the Employee Training Division are, however, continuing to partner in an effort to successfully implement the Safe and Together Model within the State of New Mexico. Included in the implementation of the model, DV providers as well as the PSD field staff have participated in and will continue to participate in Safe and Together trainings. CYFD has planned to increase capacity within the entire state of New Mexico by providing scholarships

for professionals to attend the North American Conference in May 2020; however, the conference has been postponed due to the COVID-19 related State of Public Health Emergency order issued by Governor Michelle Lujan Grisham.

CYFD PSD, BHS, JJS and community based providers have continue to partner in an effort to support and serve youth who are at risk of human trafficking and sexual exploitation. BHS has lead the efforts in the implementation of the West Coast Children's Clinic's Commercial Sexual Exploitation – Identification Tool (CSE-IT). CYFD secured the training items needed to train direct service PS and JJS staff as well as PHS providers in the use of the CSE-IT. In the upcoming state fiscal year, it is also anticipated that two residential facilities for commercially sexually exploited youth will be established and BHS continues to work with Bernalillo County to set up a Safe Home. The Safe Home will serve adult survivors of trafficking; eligible survivors will be able to remain for 90 days so that they can transition into the appropriate place of residence or service in a trauma informed manner. BHS also continues in their efforts to establish a Safe Home for child survivors of sex trafficking who are between the ages of 12 and 18.

Kinship Navigator Funding (title IV-B, subpart 2)

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

Contracts are issued through a competitive procurement process. The Request For Proposal (RFP) requires that all agencies be community-based providers. PSD staff located statewide serve as the evaluators for the RFP evaluation committee; they make recommendations for awards after evaluating the submitted proposals. CYFD then awards the contracts to the community-based agencies determined to be the most qualified to deliver the service.

Over the last four years, CYFD has evaluated the effectiveness of its programs and initiatives to promote safe and stable families. Through data analysis and meeting with stakeholders, including CYFD field staff, community providers, families, and other governmental agencies, CYFD recognized the deficiencies in the current Family Support Services (FSS), Family Preservation Services (FPS), and Time Limited Reunification (TLR) program design. Many of the deficiencies are related to the strict guidelines and eligibility criteria for each program, such as disallowing families to enroll in FSS/FPS when a child is placed in out-of-home care.

Additionally, the FSS, FPS, and TLR programs were contracted to community-based agencies through separate procurement processes, which limited the ability of agencies to be awarded all three programs if they were unable to hire licensed master's level social workers to mirror CYFD's staffing requirements for In-Home Services. In addition, the rural communities in NM have a limited ability to hire qualified staff and meet the expectations of each contract, individually, as each contract requires a certain number of families to be served each year.

Furthermore, high-needs families in NM often need extended support services to maintain stability. CYFD recognizes that family circumstances and needs fluctuate, requiring flexible programming to meet each family's unique needs. CYFD recognizes that consolidating this process will better meet the needs of families, especially in rural areas.

The combined contract will enable rural communities to provide comprehensive services to a wider range of families in need of support. The current FSS, FPS, and TLR programs limit the definition of "family" to biological parents or current guardians who had custody of the child when CYFD became involved with the family. NM has a very diverse population, and often, extended family members become the primary caregivers of children. NM recognized this need and implemented a Guardianship Assistance Program in 2017, however, service contracts had not been modified to work with this population. With the combined PSSF contract, NM will expand program eligibility not only to biological parents but to other family members, fictive kin, or anyone pursuing guardianship and adoption. In addition, foster parents will be eligible to receive FSS and FPS to help them meet the high needs of the abused and neglected children in their care. It is hoped that this expansion will help retain qualified foster parents.

NM has a shortage of licensed mental health and/or substance abuse professionals in rural areas who are able to offer wraparound support to families. This lack of professionals coupled with high caseloads and field staff turnover make it challenging to determine which community-based program(s) a family is eligible for. This means that many families who are eligible for services may not receive those services in a timely manner. The combined PSSF contract will alleviate this "guessing game" and allow the local CYFD office to refer a family in need to the local PSSF provider, and based on the referral information the PSSF provider will determine which service model (FSS, FP, TLR) is appropriate for that family. If family circumstances change, the provider could adjust services and reassign the family to a different model. Each model is driven by a tiered case management approach. Within the first few weeks of enrollment, the agency will conduct a thorough family assessment to determine the family's strengths, needs, and connections to informal/formal resources. Based on this assessment, the family will be assigned a tier level, which will drive the service intensity and planning. The tiered case management approach allows families to progress through the program at their own pace, while at the same time promoting self-sufficiency by requiring families to engage and meet qualitative goals.

CYFD recognizes that there will be a period of adjustment as staff learn the new program requirements. The implementation of the new PSSF program will coincide with the statewide rollout of the Safety Organized Practice Model, including the new safety assessment. As a result, staff will need additional technical support as they begin implementing the combined PSSF

contract. The Community Services Bureau will collaborate with NCCD to provide an initial orientation to staff and will provide ongoing technical assistance to ensure quality outcomes.

CYFD has also contracted with SHARE New Mexico to develop a Kinship Navigator Information and Referral system. The contract provides for SHARE to develop a toll free helpline and website which gives access to services and programs for Kinship caregivers. The helpline and website will connect callers to:

1. Local support groups
2. Eligibility and enrollment information for federal, state and local benefits including, but not limited to:
 - a. Temporary Assistance for Needy Families (TANF)
 - b. Supplemental Nutrition Assistance Program (SNAP)
 - c. Supplemental Security Income (SSI)
 - d. Housing Authority
 - e. Income Support Division
 - f. Medicaid
3. Pertinent trainings locally and statewide that provides information on topics such as:
 - a. Caregiving
 - b. Self –care
 - c. Mental health
 - d. Legal Assistance
 - e. Social Media and current technologies
4. State and local services such as:
 - a. Schools
 - b. Medical
 - c. Mental Health
 - d. Child Care
 - e. Legal Services
 - f. Disability Services

The contract also provides for extensive stakeholder collaboration and the development of segmented email lists to provide for the continuous dissemination of high-quality, updated information.

SHARE NM also provides a website with a link to the “New Kinship Navigation Program” which also provides information regarding support and assistance. It explains the ongoing partnership between CYFD, SHARE NM, and Pegasus Legal Services for children. Fliers regarding the helpline and website are being distributed at food pantries and other community resource offices.

Moving forward, CYFD intends to contract with an interpreter for families who speak Navajo to assist on the helpline. We are exploring partnering with 2-1-1 hotlines.

CYFD has contracted with Pegasus, New Mexico Legal Aid, Advocacy Inc., and DNA Legal services to support relative and kinship caregivers' to obtain legal authority for children in their care. The agencies will also assist with other legal barriers and will complete referrals to other community base agencies based on need. The following services are provided:

1. Direct civil legal services, either in house or through subcontracts, to caregivers in relation to:
 - a. Obtaining guardianship
 - b. Power of attorney;
 - c. Child/Parent visitation; if part of kinship guardianship final order;
 - d. Culturally appropriate legal services to immigrant caregivers;
2. Assistance in other legal matters such as:
 - a. Public benefits (applications or denials) and financial matter;
 - b. Medicaid
 - c. Housing
 - d. Social Security Disability Insurance; and
 - e. Supplemental Security Income (SSI)
3. Information and referrals for federal, state and local benefits including, but not limited to:
 - a. Temporary Assistance for Needy Families (TANF)
 - b. Supplemental Nutrition Assistance Program (SNAP)
 - c. Medicaid
 - d. Supplemental Security Income (SSI)
 - e. Social Security Disability Insurance (SSDI)
 - f. Housing

CYFD partnered with Southwest Family Guidance Center (SWFG) in the development of Relative Success Centers in Bernalillo, Rio Arriba, and Dona Ana Counties. The program will provide a coordinated and comprehensive array of resources for relative and kinship caregivers of children to increase stability in the family setting, allow children to remain connected to their families and culture, and reduce long term effects of childhood trauma. These will address the unique needs of relative and kinship families. CYFD will continue to work to expand the program state wide. The agency will provide:

1. A streamlined and simplified referral and intake procedure for all formal or informal referrals and walk-in caregivers. Intake can occur through phone, in-

person, and online interaction. Following intake an assessment will be completed to:

- a. Assist the caregivers in determining the most appropriate needs of the family and what services they may be eligible to receive.
2. Information and resource referrals for local, state and national services.
3. Topical education related to kinship care, such as:
 - a. Caregiving
 - b. Self –care
 - c. Mental health
 - d. Legal Assistance
 - e. Social Media and current technologies
 - f. Child Development
 - g. Childhood Trauma
 - h. Financial planning, Taxes
 - i. Cultural Competency
4. Assistance in completing guardianship packets to help caregivers register children for school and apply for medical services.
5. Collaborative relationships with civil legal service providers in order to refer caregivers to legal services as appropriate in relation to:
 - a. Obtaining guardianship or custody orders;
 - b. Child/Parent visitation;
 - c. Public benefits and financial matters;
 - d. Assistance with negotiations;
 - e. Housing; and
 - f. Culturally appropriate legal services to immigrant caregivers.
6. Advocacy and guidance to caregivers to access federal, state and local benefits including, but not limited to:
 - a. Temporary Assistance for Needy Families (TANF);
 - b. Supplemental Nutrition Assistance Program (SNAP);
 - c. WIC;
 - d. Supplemental Security Income (SSI);
 - e. Housing Authority;
 - f. Income Support Division;
 - g. Medicaid;
 - h. Child Support;
 - i. Respite care;
 - j. Guardianship Assistance;
 - k. Legal Assistance;

- l. Child Care Assistance; and
- m. Education

- 7. Case management services, either in house or through agreements with community based services. These services may include, Behavioral Management Services (BMS), Case management, and/or peer support services.

Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

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

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

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

In 2020-24, Activities that are planned to support monthly caseworker visits with children in foster care include:

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

PSD continues to utilize Monthly Caseworker Visit Grant funds to assist workers with documentation. This continues to be accomplished through funding of a transcription and dictation service called Speak Write. For State Fiscal Year 2018, PSD expended approximately \$160,000.00 in this program. Below is a detailed breakdown of the number of documented worker/child visits.

PSD continues to utilize Monthly Caseworker Visit Grant funds to assist workers with documentation. This continues to be accomplished through funding of a transcription and dictation service called Speak Write. For State Fiscal Year 2018, PSD expended approximately \$160,000.00 in this program.

Documented Worker/Child Visits							
Summary by County: Through June 1, 2019 to MAY 31, 2020							
		# of children with documented monthly visits	# of children without visits documented	Total all children	Percentage of children with a documented visit	# of visits in child's residence	% of visits in child's residence
County	Region						
Bernalillo	Metro	9733	294	10027	97.07%	9473	97.33%
Chaves	SE	1224	51	1275	96.00%	1141	93.22%
Cibola	NW	453	3	456	99.34%	451	99.56%
Colfax/Union	NE	210	7	217	96.77%	207	98.57%
Curry	SE	940	40	980	95.92%	928	98.72%
Dona Ana	SW	1915	13	1928	99.33%	1899	99.16%
Eddy	SE	1000	30	1030	97.09%	967	96.70%
Grant/Catron	SW	276	3	279	98.92%	270	97.83%
Lea	SE	1072	364	1436	74.65%	1063	99.16%
Lincoln	SW	150	0	150	100.00%	146	97.33%
Luna/Hidalgo	SW	201	1	202	99.50%	198	98.51%
McKinley	NW	392	4	396	98.99%	388	98.98%
Otero	SW	728	35	763	95.41%	720	98.90%
Quay/DeBaca/Harding	SE	232	1	233	99.57%	232	100.00%
Rio Arriba/Los Alamos	NE	684	192	876	78.08%	644	94.15%
Roosevelt	SE	109	0	109	100.00%	107	98.17%
San Juan	NW	1063	4	1067	99.63%	1050	98.78%
San Miguel/Guadalupe/Mora	NE	809	64	873	92.67%	760	93.94%
Sandoval	NW	432	18	450	96.00%	416	96.30%
Santa Fe	NE	950	24	974	97.54%	926	97.47%
Sierra	SW	37	0	37	100.00%	37	100.00%
Socorro	SW	158	1	159	99.37%	157	99.37%
Taos	NE	465	12	477	97.48%	451	96.99%
Torrance	NW	286	4	290	98.62%	278	97.20%
Valencia	NW	1147	8	1155	99.31%	1122	97.82%
Unknown (Not documented in FACTS)	Unknown	442	31	473	93.45%	435	98.42%
Totals		25108	1204	25839	97.17%	24466	97.44%

Additional Services Information

Adoption and Legal Guardianship Incentive Payments (section 473A of the Act)

Currently, New Mexico's adoption incentive payments are directed to enhance recruitment and provide support for foster-adoptive and adoptive parents. The majority of the funds have been utilized to maintain the foster parent liaisons each year in supporting foster and adoptive parents. Other items purchased were supplies and equipment for the production of recruitment materials, materials to be used to identify and recruit adoptive homes and promote foster parent conversions, and enhancements to electronic management information system to be

better able to collect and process information about children waiting for adoptive homes and eligible families. Funds have also been utilized to purchase media to raise awareness for the need of foster homes across the state. In addition, PSD has used the funding to improve child specific recruitment capabilities on the CYFD website and for targeted recruitment of foster families in areas of most need, including recruitment of homes that will foster/adopt older youth and sibling groups.

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

However, PSD recently received adoption incentive funds as the number of finalized adoptions has begun to increase. PSD plans to utilize the funds on services that will continue to support foster and adoptive parent recruitment and retention. PSD is exploring the possibility of using this funding to contract with a company who has the ability to provide a self-service mechanism in which prospective foster parents can check the status of their application/ licensing process.

In 2020-24, in the spirit of change, CYFD Protective Services division will be adjusting the use of both adoption and guardianship incentive payments to provide an online process for licensing, training and supporting foster, adoptive and relative resource families. With the automation of the process, provided by BENTI, New Mexico anticipates seeing an increase in applications, increase in approvals of licensures and children reaching permanency through either reunification, guardianship or adoption. Due to the extensive rural and frontier regions of New Mexico, stakeholders and resource families need other options available to communicate with CYFD staff, community providers, request assistance to stop potential adoption or guardianship disruptions and receive training to maintain their licensure status. CYFD anticipates that the system will be fully operational for New Mexico families within 6 to 9 months. (December-March 2020)

Adoption Savings (section 473(a)(8) of the Act):

In 2019, CYFD was able to identify the process to accurately identify and reflect adoption savings. CYFD is currently cleaning up past reporting back to 2017 in order to report accurate accounting to the Children's Bureau in the area of adoption savings. Moving forward, CYFD will be able to show savings and ensure that those savings are spent on Title IV-B and IV-E programs in the areas identified in the PI for post adoption and guardianship services and for children at risk of entering foster care. CYFD will be planning and implementing a strategy to both show the savings and how that funding is going back to the target area in the area of placement and long term permanency as well as at risk of removals..

CYFD will be transitioning to using the actual amounts in lieu of sampling or application of statistical results. CYFD will be using a function in the current SACWIS (FACTS) system to identify those children that are eligible for IV-E adoption assistance. CYFD will use the FM02_49 report

for both programmatic and fiscal reporting, which will identify children that are receiving IV-E adoption funds.

John H. Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee Program) (section 477 of the Act)

Agency Administering Chafee

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

The Youth Services Bureau consists of the following personnel:

- Bureau Chief – Provides oversight and supervision for overall implementation of the program.
- Two Youth Transition Supervisors—These positions each manage seven youth transition specialists and one of the senior youth transition specialists in order to assist the Bureau Chief in daily operations, supervision and guidance. One also supervises the Youth Services Worker and High School Intern.
- One Lead Youth Transition Specialist—Provides direct transition support services to individual youth across the state, provides staff training and technical assistance, assists with the coordination of ETV and Chafee program funds, acts as the chief adult supporter and liaison to LUVYANM, attends various collaborative meetings, and carries out other assignments to support the Bureau Chief, the Youth Transition Supervisors, and the Youth Transition Specialists.
- Thirteen Youth Transition Specialists (YTS)—Provides direct transition support services to individual youth across the state.
- One Youth Services Worker (YSA)—Provides support to Youth Transition Specialists and conducts credit reports.
- Business Operations Specialist—Provides administrative support to staff and management of the Youth Services Bureau.
- One High School Intern – Provides support to the Youth Services Bureau through researching different topics, tracking data, and supporting youth through outreach.

Description of Program Design and Delivery

New Mexico provides youth transition services to meet the needs of older youth who are in foster care, have aged out of foster care, were adopted from the foster care system at sixteen years of age or older and who have permanency achieved through the Guardianship Assistance Program at age sixteen or older. A statewide youth advisory board, Leaders Uniting Voices: Youth Advocates of New Mexico, actively participates in developing the youth services program and provides feedback and suggestions to PSD staff, community based providers and other stakeholders for system and practice improvement. As of July 1, 2020, New Mexico also provides extended foster care referenced throughout this document as Fostering Connections.

There are eight primary service components offered to youth who enter foster care at age 14 or older or who turn age 14 while in foster care who are unlikely to exit to permanency. Those service components are as follows:

1. Independent Living (IL) Assessment: The IL Assessment is completed by the Permanency Planning Worker (PPW) for all youth in PSD custody regardless of their permanency plan. The IL Assessment consists of a current psychosocial history that focuses on the youth's strengths and goals and the Casey Life Skills Assessment (CLSA). The PPW also completes a written IL Assessment Summary which includes the results of the assessments and recommendations to assist the youth in life skills development and focuses on individual transition service needs. The PPW completes the initial IL Assessment for a youth turning thirteen and a half years of age or when a youth over the age of thirteen and a half enters PSD custody and remains in custody following the custody hearing. A reassessment is conducted at least every 18 months or when there is a significant change in the youth's circumstances. The PPW provides copies of the CLSA and the IL Summary to the youth and the youth's foster care provider in addition to maintaining a copy in the youth's case record.
2. Life Skills Plan: A life skills plan is required for youth who are 14 years of age or older who are in foster care regardless of the permanency plan and is a component within the youth's case plan which is presented to the court at each judicial review or permanency hearing. The plan outlines the activities necessary to support the youth in developing the knowledge and skills needed for successful transition to adulthood. The plan prioritizes the life domains the youth requires the most assistance with and can include secondary or post-secondary academic support services, career preparation services, budget and financial management services and healthy relationship education services. The youth, PPW and YTS review the plan every six months or more often at the request of the youth and is updated in conjunction with the case plan.
3. Life Skills Development: Youth who are 14 years of age or older who are in foster care participate in life skills development regardless of their permanency plan. Life skills development occurs through a variety of methods such as group learning, community providers, resources and mentors, self-paced curricula and teachable moments. In addition, the youth's YTS provides assistance with obtaining, interpreting and understanding the youth's annual credit report.
4. Transition Planning Process: The YTS contacts the youth approximately three months prior to their 17th birthday to schedule and conduct an informal meeting to support and assist the youth in developing the plan for what will happen when the youth turns age 18 and ages out of foster care. The transition plan includes goals in the following domains: safety; housing; education; employment or income; physical and mental health; local opportunities for mentors; and on-going support services. The youth and YTS also identify all the individuals the youth would like to invite to the

formal Youth Transition Meeting (YTM) such as the PPW, foster parents, Youth Attorney, family members, friends, mentors and other supports. The YTM takes place prior to the youth's 17th birthday and is facilitated by the youth with support from the YTS as needed. The transition plan is attached to the court report and presented to the court at the first permanency hearing after the youth's 17th birthday. The plan may be updated at any time by request of the youth or any member of the youth's team prior to the youth's 18th birthday. The updated Transition Plan is presented to the court at the youth's discharge hearing. The plan must be reviewed and updated with the youth and the youth's team within 30 days of the youth's 18th birthday or the youth's discharge hearing.

5. Transition Support Services: Transition support services are provided to youth in PSD custody who are age 14 or older by their Permanency Planning Worker. Youth Transition Specialists provide these services to youth who aged out of foster care at age 18 and youth over the age of 18 who were adopted from foster care at age 16 or older. Transition support services are provided for the purpose of preparing and assisting youth in their transition to adulthood. These services begin during the preparation for the transition meeting and may continue until the youth turns 21 years of age. The services can include but are not limited to: locating and/or maintaining safe, stable housing; identifying and accessing educational and vocational opportunities; information and referral on employment or income resources; referrals to physical, behavioral and/or mental health services; assisting with Medicaid enrollment; linking youth with significant adult connections, prior to and after aging out of foster care; and accessing other continuing support services as available.
6. Financial Resources: There are three possible financial resources for youth to assist them in their transition to adulthood, in addition to the Education and Training Voucher Program. These include:
 - ***Start-Up Funds***: These funds are made available through the Chafee Act to assist eligible youth purchase household items and/or services they need to establish a home or to support the youth in their transition to adulthood. In 2020, eligibility extended to the age of 23. Youth who are under the age of 23 and aged out of foster care on their 18th birthday; youth between the ages of 18 and 23 who were adopted from foster care after their 16th birthday; and youth in foster care who are age 17 and receiving ILPS may be eligible to receive these funds. The maximum amount of funding an eligible youth may receive in their lifetime is \$1,500.00 and must be used by the youth's 23rd birthday. Allowable and unallowable expenses are determined according to the standards established through the Chafee Act. Youth must complete and submit an application in order to be considered to receive the funds and turn in receipts for purchases to ensure the funds are used appropriately. The limit on the amount of Chafee funds that may be used for room and board expenses for youth ages 18 and older remains unchanged, with no more than 30 percent of Chafee funds expended for room and board.

- ***Independent Living Placement Status (ILPS):*** ILPS allows an eligible youth to receive a monthly stipend in order to live as a boarder with a foster parent or to live independently with limited supervision. The stipend amount is based on the substitute care monthly maintenance payment amount and is considered for youth who are likely to age out of foster care starting at age 17 until age 21. As part of the ILPS Agreement, youth cannot be incarcerated or on runaway status. In addition, youth must submit monthly documentation of employment, actively seeking employment, enrolled in school, have a mental or physical disability that is preventing them from currently attending school or working, or participating in a rehabilitation program. Eligibility for ILPS is assessed on an on-going basis.
 - ***Medicaid:*** Medicaid is available to youth who have aged out of foster care up to the age of 26 in accordance with the federal Affordable Care Act. Youth must fill out an application on an annual basis to ensure continued eligibility and coverage.
7. **Youth Leadership Skills:** Youth are encouraged to participate in leadership skills development such as advocacy and policy development in multiple ways within the agency. One of the opportunities youth are encouraged to and supported in leadership skills development is through participation in Leaders Uniting Voices: Youth Advocates of New Mexico (LUVYANM). LUVYANM is a youth advocacy and advisory board composed of youth from around the state who represent current and former foster care youth. LUVYANM members actively participate in the evaluation of policies and practices of the state's child welfare system and advocate for system improvements. They educate other youth, agency staff, foster families, agency partners and the general public on issues related to youth in foster care. LUVYANM takes the lead in planning the annual Independent Living Youth Conference, train PSD staff in youth engagement, participate in policy development and revision meetings, present at conferences such as the Children's Law Institute and Foster Parent Conferences and participate in advocacy activities with the New Mexico Legislature.
 8. **Housing Services:** Transitional Living Programs are provided through contracts with four programs located in different parts of the state to assist youth with accessing safe, affordable and stable housing as well as provide life skills development opportunities through a trauma informed and positive youth development framework. These programs are located in Albuquerque, Santa Fe, Taos and Hobbs.

Program Goals

In an effort to identify program areas to strengthen and build upon, the Department regularly seeks stakeholder input. One of the critical stakeholders are the youth of New Mexico. Their input and feedback has been obtained through formal and informal requests. A few of the formal settings that current and former foster youth have provided their input and feedback are during the annual Independent Living Youth Conference Town Hall, monthly LUYVANM meetings and youth participation in workgroups. As a result of stakeholder input, the following five areas have been identified as program areas to strengthen in order to improve outcomes for youth:

- implementation of extended foster care;
- expansion of the housing service array;
- increased placement with relatives and siblings;
- supports and opportunities to reconnect with siblings and other relatives; and
- life skills development services.

Over the next five years, the Youth Services Bureau will partner and collaborate with both internal and external partners and stakeholders in order to strengthen these five program areas. Some of the key partners include CYFD Behavioral Health Services and Juvenile Justice Services, the Heart Gallery of New Mexico Foundation, the Corrine Wolfe Children's Law Center, the Capacity Building Center for States, the New Mexico Coalition to End Homelessness and the New Mexico Child Advocacy Network.

Additionally, PSD will collaboratively create and implement a robust training to include best practices focusing on protective and promotive factors within the workforce. This training could be offered to PSD direct staff working with youth, foster parents, host homes, congregate care and kinship homes. Providing this training will provide program delivery that is constant, no matter what services or supports the youth or the young adult is connected too. This program delivery will focus on:

- Impact of trauma on youth or young adult's development
- Youth resilience
- Importance of social connections
- Helping youth and young adults better understand their own development
- Teaching youth or young adults on how to access concrete supports in times of need

Enhancing social, emotional, behavioral, intellectual and moral competence in youth and young adults.

Youth Engagement in the Development of the Plan

In an effort to obtain youth perspective, input and feedback that is representative of the diversity of the state, Youth Services Bureau works closely with LUVYANM. Since membership includes youth from all geographic areas the state who are currently or were previously in foster care, they are able to provide a broad perspective which is critical in a state that is as geographically large and rural as New Mexico is as well as ethnically and culturally diverse. Each year at the annual independent living conference, LUVYANM conducts a town hall meeting with approximately 70 youth who participate to discuss issues that are most relevant to them. A summary of the discussion is developed and synthesized including recommendations for changes to youth services and the state's child welfare system as a whole. This information is being used to inform New Mexico's state Child and Family Services Plan.

In addition to the town hall meeting mentioned above, YSB utilizes both formal and informal opportunities to seek and obtain input and feedback from our youth. The two primary, formal settings are:

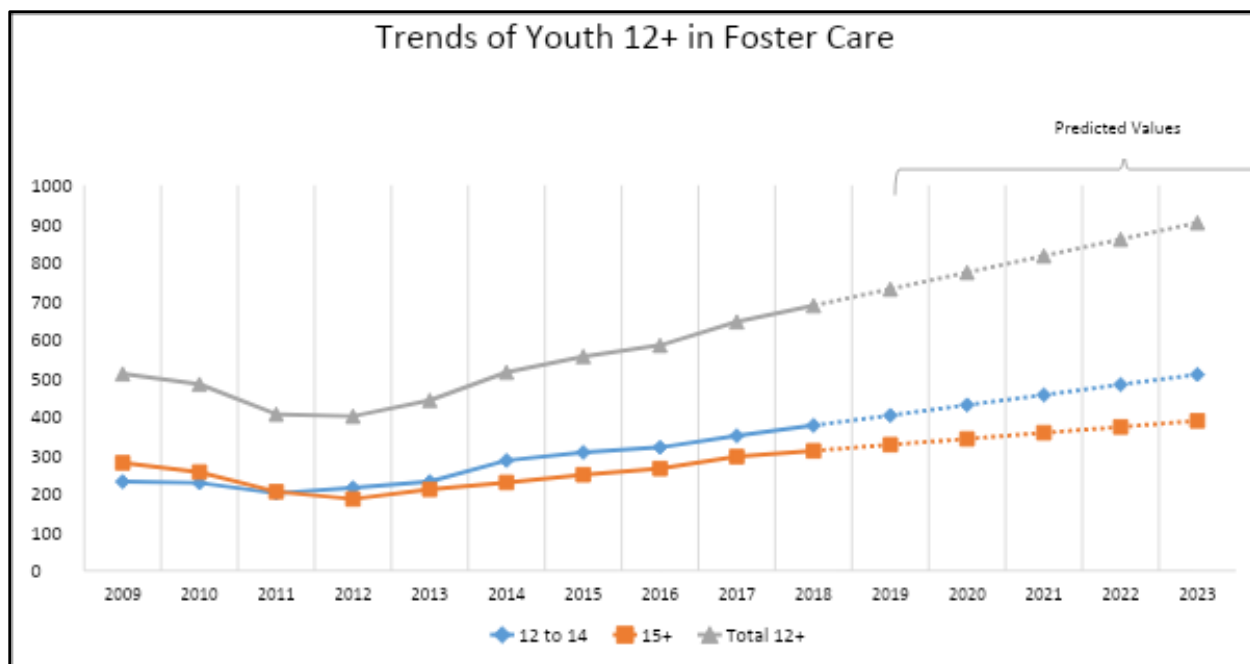
- The annual ILY Conference Town Hall – the topics focused on are identified and selected by LUVYANM members and meeting participants. The topic identified for the 2019 town hall is extended foster care (Fostering Connections Act and Program).
- Monthly LUVYANM Meetings – the youth set the agenda for their monthly meetings and have a time slot designated for YSB. This time allows for activities such as the sharing of information and requesting feedback, recommendations and feedback.

Youth also participate in CYFD workgroups. CYFD PSD has partnered with the Capacity Building Center for States on several initiatives including work focused on sibling connections and relative placement efforts. Youth served as workgroup members on the Sibling Connections Team and continue to participate in the Relative Connections Team. Further, youth participate in activities and opportunities for educating and informing other stakeholders about the foster care experience for youth, such as the Annual Foster Parent Conference, and the Annual CLI Conference. There are also youth panels at ongoing staff meetings and trainings including the on-going New Employee Training (NET), Statewide PSD Managers Meeting, and trainings conducted by the county offices, such as the RAFT training. Youth also conducted the Youth Engagement Training (YET) at the regional trainings of new PSD staff and were workshop presenters at the 2019 National Citizen Review Panels Conference.

PSD continues to utilize the annual independent living conference, LUVYANM town hall and meetings related to youth to collect youth data. During 2019, 49 youth participated in LUVYANM meetings. The 2019 annual independent living conferences theme was “One Team, One Fight”. LUVYANM determines the theme of every annual Independent Living Conference as well as the opening and closing speakers and the workshops. The opening keynote speaker was Chauncey Strong and his presentation was titled “One Team, One Fight and Victory for All: Effectively Making Changes in Foster Care.” Mr. Strong spoke about the many issues that are worth fighting to improve once we realize exactly what that fight is. The closing keynote speaker was Dee Hankins and his presentation was titled “Life Throws Curveballs.” Mr. Hankins spoke about how the challenges youth in care can face can provide the ability to bounce back when you focus on resilience. The conference workshops offered during the 2019 ILY Conference were:

- Strategic Sharing-Sharing Your Story to Effectively Advocate for Change
- Applying for a Job, the Interview, and Keeping the Job
- R.U.L.E.S of Resilience
- College Prep: Welcome to the World of Post-Secondary Education
- Systems Go Rocket Launch
- Desperate Journey (We all Have a Story to Tell)

Breakdown of the number of youth over aged 12 over time in New Mexico’s foster care system:



PSD’s foundations of practice training is focused on youth and includes information on services the Youth Services Bureau provides. This training includes information on:

- positive youth development;
- the importance of permanency for older youth with a particular emphasis on relational permanency and biological family connections;
- special issues of working with youth including sexual orientation and pregnant and parenting youth; and
- the services for which youth are eligible.

Lastly, PSD provides a full day-training for staff called “Working with Youth” that includes information on positive youth development, adolescent brain development, youth engagement, talking with youth about sex, and youth safety issues.

Further, YSB leadership has been active—including serving as chair—in the Relative Connections Team Workgroup of the Capacity Building Center for States. YSB leadership participates in the New Mexico Coalition to End Homelessness and Youth Shelters & Family Services lead Youth Homeless Demonstration Program (YHDP) efforts for Northern New Mexico. Participation has included attending and engaging in community conversation sessions. The group was awarded the YHDP grant with the Community Services Bureau Program Manager serving as an RFP evaluation committee member. The YS Bureau Chief has presented at community-based information and discussion sessions, and led a breakout group for the Northern New Mexico YHDP Core Planning Team Work event.

PSD has partnered with Behavioral Health Services, New Day, New Mexico Solutions and New Mexico State University to implement the Nurtured Heart Approach (NHA) in an effort to improve outcomes for youth in foster care and youth who have aged out of foster care. The initial plan was a staggered implementation of NHA in three county field offices; however, the plan has been revised to implementation in one county field office (Sandoval) and with the Youth Services Bureau. The Youth Services Bureau Chief was one of seven individuals selected to participate in the NHA Certification Training Intensive and all successfully completed the certification. All YSB staff have participated in an NHA training and will receive ongoing support with the implementation of NHA from New Day, New Mexico Solutions, NMSU and Behavioral Health Services.

State Sharing of NYTD Data

New Mexico administers the basic 22 question NYTD survey. The Youth Services Bureau has begun presenting on Youth Services practices, policies and procedures to local county office staff. These presentations include information about NYTD such as the purpose of NYTD, the importance of field staff obtaining and information needed for NYTD reporting into FACTS, possible outcomes for not meeting the NYTD requirements, data gathered and opportunities for field staff, youth, YTSs and community based providers to partner around life skills development, educational supports and housing services and supports. The Youth Services Bureau also presents at conferences and stakeholder meetings and includes information about NYTD in those presentations as well.

PSD continues to obtain a great deal of qualitative data particularly from youth across the state. PSD uses this data to inform and improve policy, procedure and practice. This type of qualitative data has been shared with stakeholders including who assisted in the development of the youth grievance procedures such as New Mexico Child Advocacy Network and LUVYANM members and partners such as the Sibling Connections Team, the Relative Care Team and the Center for Capacity Building.

Youth Transition Specialists are responsible for completing the outcomes surveys with youth who are identified for each specific age cohort. The Research, Assessment and Data Bureau's Data Unit provides electronic notices to the Youth Services Bureau by age of the specific youth that have been identified as needing to complete a survey. The preference is for the surveys to be completed in person utilizing Survey Monkey®; however, it is not always possible for the surveys to be completed in person thus the YTS will conduct the survey with the youth via telephone. Youth are eligible to receive a financial incentive of \$50.00 for their participation in the survey.

Youth Transition Specialists and Permanency Planning Workers enter service data into the FACTS system. When the PPW uploads the Casey Life Skills Assessment into FACTS, an independent living (IL) category is created for the specific youth under the primary FACTS case and allows for the PPW, YTS or other approved PS staff to enter youth services related information for that youth. Options available under IL include each domain of life skills and financial assistance, an option to customize entries for uncategorized services such as decision making skills and a menu

of descriptors which allow for the ability to extract data for specific life skill services. In addition, contractors who provide life skills development and housing support services collect data on the services they provide to the youth who are involved with the state's child welfare system and provide that data to their contract program manager on a semi-annual basis. The program managers then enter the data into FACTS to ensure the services the youth participate in are captured in their case record and included in the NYTD reports.

Provide information on the state's plan to strengthen the collection of high-quality data through NYTD over the next five years.

PSD continues to use the following methods to locate and engage youth who have aged out of care who are part of the survey cohorts: Facebook, phone, e-mail, text, or through the mail. The Youth Services Bureau continues to request up to date contact information from youth, asks youth how staff can be of assistance, and offers services at the time of the survey. Permanency planning workers and Youth Services Bureau staff continue to enter service data into the FACTS system. Housing and life skill development contractors continue to provide data on a semi-annual basis on the services they provided to the protective services youth in their programs. This data is then entered by Youth Services Bureau staff and Community Services Bureau Staff into the FACTS system so that the services reports can be as accurate and complete as possible.

PSD is confident in its collection, analysis, and use of NYTD data. The division plans to structure and increase its public facing communications. Under direction of responsible Youth Services Bureau Chief, PSD is planning additional efforts which are likely to include posting summaries, analyses, etc. to the CYFD website, additional presentations to the community, and other means of sharing information with youth, families, and communities and receiving their feedback. Additionally, PSD intends to utilize the New Mexico NYTD data to identify areas of need for improvement with community providers as we expand our youth services.

Serving Youth Across the State

Youth services now has thirteen youth transition specialists located across the state and cover all five regions and one Lead Youth Transition Specialist. They are located in the following cities: Las Vegas, Farmington, Rio Rancho, Los Lunas, Las Cruces, Carlsbad, Clovis, Roswell and Albuquerque. Youth transition specialists are expected to collaborate and coordinate with the local county offices to ensure that all youth in New Mexico's foster care system are able to receive the necessary services to successfully transition to adulthood.

PSD obtained two new positions in 2019, a Youth Services Worker and a High School Intern. This addition has been helpful in the provision of adequate support of Youth Transition Specialists to do more effective work with their youth. Although there were some Youth Services vacancies in 2019, there was less turn over and more stability in the bureau. Positions in the southeast part of the state seem to have more frequent turnover and can be challenging to fill.

NYTD services data reveal that in counties where a Youth Transition Specialist (YTS) is housed receive a higher number of life skill and financial assistance services than in counties where no

Youth Transition Specialist is housed. This makes it twice as likely that youth who live in “YTS counties” will receive services as those who do not live in “YTS counties.” This data is consistent across all domains of life skill and financial assistance.

Serving Youth of Various Ages and Stages of Achieving Independence

Youth served by the state’s child welfare system receive youth services, regardless of their permanency plan, through the combined efforts of field staff, foster parents, child placement agencies, community based providers and the Youth Services Bureau staff.

Youth Ages 14 to 18

At age thirteen and a half, youth who are in foster care participate in the IL Assessment which includes the Casey Life Skills Assessment, the Let’s Get Started Planning for the Future and the Individual Capacity and Functional Assessment. They also actively participate in their individual case planning, the development of their life skills plan, and the identification of needed transition support services. The PPW and the out-of-home provider work with the youth on developing life skills based on the needs identified in the CLSA. The PPW provides transition support services for youth under the age of 18 who are in foster care and youth over the age of 18 who remain under the jurisdiction of the court. The YTS provides transition support services for youth over the age of 18 who aged out of foster care at age 18 and those who were adopted from foster care at age 16 or older. In 2021, PSD will be meeting with youth, internal, and external partners to identify barriers, gaps, and improvements that can be made to our current assessment and case planning processes through community stakeholder meetings.

Youth Transition Specialists ensure credit reports are obtained for and provided to youth beginning at age 14 and occurs on an annual basis until the youth exits foster care. If any discrepancies are identified during this process, PSD works with the credit reporting agency to resolve any issues prior to a youth exiting care. At age 17, youth become eligible to participate in Transitional Living Programs and to receive an Independent Living Placement Status (ILPS) stipend in order to live in a semi-independent living situation. The youth’s PPW is required to assess and verify that the home is safe, that the youth has the skills necessary to live safely in such a situation and that it is unlikely the youth will be exploited.

New Mexico does not currently have an implemented extended foster care program. Once a youth ages out of foster care at age 18, the YTS becomes their primary worker. For those who do not receive Medicaid through other programs such as Social Security, they are eligible to receive Medicaid to age 26 through the Affordable Care Act and only requires the youth to complete a form once a year with their assigned YTS. They may also be eligible to receive the ILPS stipend, Start-Up funds, ETV and the tuition and fee waiver.

Although youth are not currently able to remain in foster care beyond age 18, legislation allowing for the extension of foster care was passed during the 2019 Legislative Session through the Fostering Connections Act and was signed into law by Governor Lujan Grisham. In order to

implement extended foster care in New Mexico, several activities and tasks were outlined in the legislation. Some of those are as follows:

Planned extension of Title IV-E foster care assistance to youth ages 18-21

In March 2019, the New Mexico legislature passed SB 23, which implements the federal option to extend Title IV-E foster care supports to youth ages 18-21. The bill phases implementation over three years beginning July 1, 2020. CYFD supports the aims of the bill, and in the coming year will develop an implementation planning process. Among the work products of that process will be a detailed plan to accommodate the Chafee program to the Title IV-E extended foster care program. 2020-2024 APSR's will report on this process and detail any changes to the program outlined above.

Extension of Chafee Services to Age 23

New Mexico is committed to ensuring that emancipated youth between the ages of 18-23 continue to receive supportive services as they acclimate into adulthood. In order to plan for these services, a workgroup has been established to ensure all necessary considerations are taken into account. It is expected that a comprehensive roll-out of the Chafee extension will complete by 2024. Updates of the progress of the implementation will be provided in future APSR reports.

Assessment tools

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

Collaboration with Other Private and Public Agencies

Due to the large geographical and rural landscape of the state as well as the limited availability and accessibility of services, the partnerships PSD has with other private and public entities is critical. Some of these organizations include New Day Youth and Family Services, the Heart Gallery of New Mexico Foundation and the New Mexico Child Advocacy Network. Also essential to serving youth who are in foster care or who have aged out of the foster care system is the Behavioral Health Services Divisions within CYFD.

- New Day Youth and Family Services (New Day), which began as a runaway shelter in Albuquerque, has been serving youth for over 40 years and has expanded their programs throughout the years in response to the growing needs of transition age youth in the state. Those programs include Safe Home, Life Skills Academy, Counseling and Case Management Services, a Detention Diversion program, and a Transitional Living Program. Due to the lack of available and willing foster families to have youth in their homes, there is an increasing level of need for alternative out of home placements for youth in foster care as well housing options for youth who have aged out of foster care. Through

collaboration between New Day and the agency, youth ages 11-17 have been able to access a safe place to live in emergency situations through their shelter, Safe Home. In addition, youth ages 17-22 can participate in New Day's Transitional Living Program (TLP) which can range from 6 to 18 months. Through partnering between New Day and Youth Services Bureau staff in particular, youth ages 16-22 have increased opportunities to develop key skills through New Day's Life Skills Academy. Although Safe Home, TLP and Life Skills Academy are programs available to all youth, regardless of system involvement, New Day has consistently engaged in unique, creative and problem solving efforts with the Department in an effort to meet the placement, housing and life skills development needs of youth in foster care.

- The Heart Gallery of New Mexico Foundation (the Heart Gallery) assists PSD youth who are in foster care and who have aged out of foster care to achieve independence through myriad ways. As noted in a previous section, the Heart Gallery is a primary support to LUVYANM. In addition to providing LUVYANM with assistance to secure monthly meeting space, the Executive Director also invites successful members of the community who have experienced and overcome their own challenges to speak at the monthly meetings to provide strategies and opportunities for success. Youth are also able to submit requests for financial assistance for items for which there is no other funding source. Previous requests have included funding to pay for driver's education, GED fees and high school graduation expenses. They also continue to partner with local organizations and business to provide youth with hygiene items as well as household items such as mattresses, bedding, cooking and other kitchen supplies, and furniture that youth can request when setting up their own places of residence.
- The New Mexico Child Advocacy Network (NMCAN) also continues to be an important partner for helping youth prepare for adulthood. NMCAN serves youth located in the Albuquerque Metro Area through various projects such as the Mentoring Project, Back on Track, Opportunity Passport and Youth Leaders. The Mentoring Project is available to Metro area youth ages 14-25 and matches a youth with an adult volunteer who focuses on encouraging the youth in their interests and goals. The Back on Track project is available to Metro area youth ages 17-25 who are disconnected from education and is delivered through a partnership with New Day to assist youth access to educational and employment preparation supports. The Opportunity Passport Project is available to Metro area youth ages 14-25 and focuses on helping youth become financially capable by providing financial literacy classes. In addition, a youth is eligible to receive \$100 after completing the first three financial literacy classes and can earn up to \$3,000.00. Their Youth Leaders program offers youth in the Metro area an opportunity to become involved in system and policy change through advocacy. NMCAN also actively seeks to reduce systemic barriers of system involved youth by advocating for legislation such as the Foster Youth Tax Credit Law and the Fostering Connections Act.
- The partnerships and collaboration efforts with the Behavioral Health Services Division is also vital in YSB efforts to support and prepare youth for independence. Behavioral

Health Services and Youth Services Bureau frequently partner and collaborate in the areas of supportive housing, youth engagement trainings, Wraparound and youth substance abuse programming. One of the specific programs that serves both JJ and PS youth in the Albuquerque area is the Supportive Housing program. This program has been in operation for several years and has been able to access preference points for youth participating in the supportive housing program with the Albuquerque Housing Authority so that those youth are able to access Section 8 Housing in a timely manner. In addition, Behavioral Health Services and the Youth Services Bureau have joined in a coordinated effort to implement the Nurtured Heart Approach within the bureau in order to better engage and serve youth who are in foster care or have aged out of foster care.

YSB also works closely with the Developmental Disability Services Division of the NM Department of Health to access the Developmental Disability (DD) Waiver for youth who qualify. Historically, there has been at least a ten year wait list for eligible individuals to be allocated the DD Waiver and receive services. Over the several years, PSD has developed a system with DOH so youth who are eligible for DD Waiver services are able to access an expedited allocation and have exhausted all other resources. This has helped many severely disabled youth access services when there are no other options for their care.

PSD also coordinates with other local programs and initiatives in an effort to support youth in accessing housing resources as well as pregnancy prevention and parenting supports:

- Youth Homelessness Prevention: As described previously, PSD has issued four year contracts for four separate transitional living programs located in different areas of the state to provide housing and life skills development services to PS and tribal youth. These contracts end on June 30, 2020. PSD also continues to partner with the Supportive Housing Coalition and the CYFD Behavioral Health Services Division to provide supportive housing for youth who reside in Albuquerque. In 2019 Youth Services continued to refer youth in Dona Ana County for the Family Unification Program (FUP) Vouchers. In 2017 New Day was awarded the Demonstration Grant. New Day provides services to both the LGBTQ population and the youth aging out of foster care population. There is some overlap in both populations. New Day rents apartments from a complex in Albuquerque. One of the apartments within this complex has been turned into an office for staff, which has had positive outcomes. Having staff onsite seems to be an effective approach as youth build stronger and more successful relationships with staff on site. It has also created a greater sense of community within the complex. PSD refers youth to this program and works closely with staff in the program to better assist PS youth who live there. New Day also provides case management, life skills, Nurtured Heart Approach and wrap around services to these youth. New Day is working with Apex to provide a qualitative evaluation to the youth they serve under this grant. The qualitative questions capture identity for LGBTQ youth and attachment for youth who aged out of foster care.
- Pregnancy Prevention and Supports for Parenting and Pregnant Youth: PSD Youth Services Bureau Chief is a member of the Expectant and Parenting Teens Statewide

Advisory Committee and YSB staff attended the 2019 Town Hall Event as well as assisted in facilitating table discussion. Additional supports available to expecting and parenting youth include home visiting programs through CYFD Early Childcare Services Division and Department of Health, pre-K programs through CYFD ECS Division and PED and child care services and supports through CYFD ECS Division.

Determining Eligibility for Benefits and Services

Currently, all youth who aged out of foster care at age 18 are eligible for the services and benefits described in this plan. In addition, all youth who emancipate from one of the 22 New Mexico tribes and pueblos social services are eligible for all the benefits and services described in this plan. Youth who age out of foster care in other states and move to New Mexico are also eligible for benefits and services that are available to New Mexico youth. Youth who were adopted from foster care after the age of 16 in New Mexico or from the tribes and pueblos in New Mexico, and youth who achieved permanency through the Guardianship Assistance Program are eligible for the services described in this plan as well.

In 2020-2024, PSD will continue to provide services to youth in PSD and Tribal custody who age out of foster care at 18, including youth who are adopted at age 16 or older, and to youth who achieve Kinship Guardianship through the Guardian Assistance Program that was finalized at 16 or older. PSD continues to provide services to eligible youth who move to New Mexico.

Cooperation in National Evaluations

PSD and Youth Services Bureau will cooperate in any national evaluation of the effects of the program in achieving the purposes of the Chafee Program.

PSD and the Youth Services Bureau continue to be willing to cooperate in any national evaluations. In the past year the Youth Services Bureau participated in an interview and survey on the Supportive Housing Program through a team of researchers at the Urban Institute and Chapin Hall at the University of Chicago working with the Administration for Children and Families (ACF) of the US Department of Health and Human Services to help develop an evaluation agenda to learn more about the effectiveness of programs for youth in foster care.

In addition, Youth Services participated in a Foster Club survey regarding states who provide Medicaid until age 26 for youth who move to New Mexico from another state.

Education and Training Vouchers (ETV) Program (section 477(i) of the Act)

ETV funds are made available to youth who meet eligibility criteria in order to assist them in accessing post-secondary education or vocational training. Youth are informed that ETV cannot be used to cover expenses already paid by scholarships, grants, loans, work study, etc. They are also informed that receiving ETV funds does not affect their eligibility for other federal assistance. The funds are dispersed through a contracted fiscal agent and paid to the vendor or

provider rather than through personal checks payable to the youth. The youth's assigned YTS provides assistance as needed to the youth in completing and submitting the ETV application packet. The ETV Program provides up to \$5,000.00 per year for a total of five cumulative years for eligible youth. In 2021, New Mexico will be implementing a program allowing ETV vouchers to be available until an eligible youth reaches 26 years of age.

Tuition and Fee Waiver

The State of New Mexico's Foster Child Tuition and Fee Waiver for state post-secondary state education institutions initially took effect in May 2014. At that time, the minimum eligibility criteria youth had to meet was the following:

- The youth was in foster care on the day before their 18th birthday, or
- The youth was in foster care on or after the day of their 14th birthday and their parents' parental rights were terminated or relinquished, or
- The youth was in foster care on the day they graduated from high school or received their GED in NM

The State of New Mexico's Foster Child Tuition and Fee Waiver for state post-secondary state education institutions was amended during the most recent legislative session and took effect in July 2019. The current minimum eligibility criteria youth must meet is as follows:

- The youth was in foster care at any time on or after the day of their 14th birthday. For the purposes of this program, foster care means a young person was in the legal custody of the State of NM CYFD; a NM Indian Nation, Tribe or Pueblo; or the US Department of the Interior BIA, Division of Human Services.
- Is enrolled in a New Mexico state school of higher education before their 25th birthday. For the purposes of this program, as school of higher education includes any publically funded and accredited state college or university or any of their branches, a community college or a technical/vocational institute in New Mexico

Methodology Used

The ETV application indicates what funds a youth has been awarded and utilized previously as well as what those funds were used for. In addition, all receipts for items and services purchased using ETV are submitted to the Lead Youth Transition Specialist and the Youth Services Bureau Business Operations Administrator for review and reconciliation. The ETV amount awarded and the receipts for the items and services purchased are tracked both electronically and using a hard file system according to youth.

Since the implementation of electronic gift cards, in addition to physical gift cards, Youth Services Bureau staff are required to print out the email with the electronic gift card and turn it in with the receipts of items purchased using that electronic gift card as part of the submission packet sent to the Lead Youth Transition Specialist and the Youth Services Bureau Business Operations Administrator.

PSD utilizes this process to ensure that the total amount of ETV funds awarded to a youth do not exceed the total cost of attendance, in an effort to maintain strong internal controls and to ensure the data reported is unduplicated.

Eligibility

Currently, youth who have aged out of foster care at age 18 or who were adopted at age 16 or older from foster care, or who have permanency achieved through the Guardianship Assistance Program at age sixteen and who have obtained a high school diploma or General Education Development (GED) and enrolled in an accredited post-secondary educational or vocational institution is eligible for the program. Also, youth who are receiving ETV funds prior to their 21st birthday are eligible to continue receiving ETV funds until their 23rd birthday.

To maintain eligibility, a youth must maintain a GPA of 2.0 or higher. If, at any point, the youth's cumulative GPA drops below a 2.0, the youth develops an academic improvement plan with support from the YTS to identify resources, goals, and plans to assist the youth to improve academic performance. Youth Services will continue to refer youth who are located in the Albuquerque Metro area to NMCANs "Back on Track" program through CNM in order to support youth in obtaining their educational goals.

In 2021, PSD plans to hold several stakeholder meetings statewide to develop a system in New Mexico that best supports youth while aligning with the new requirements allowing ETV vouchers to be available until an eligible youth reaches 26 years of age.

Currently, the Lead Youth Transition Specialist determines eligibility for ETV funds. With the extension of foster care changes, PSD plans to establish a specialized ETV and Chafee staff position will solely work on improving education outcomes with youth.

Application

As noted above, the youth's assigned YTS provides the youth with assistance in completing and submitting the ETV Application Packet. The packet includes a simple two page application form as well as proof of completion of the Free Application for Federal Student Aid (FAFSA); proof of enrollment in an accredited post-secondary educational or vocational institution; and proof of academic progress if the youth has completed more than one semester of education; and any other necessary supporting documentation to the Lead Youth Transition Specialist to confirm eligibility. The Lead YTS also reviews the application packet for completeness and determines whether the funding request is within the allowable expenditures and established funding limitations. The applications that do not meet program requirements are denied. If an application is denied because it was determined to be incomplete, the YTS may resubmit the request with a complete application packet. The reviewer provides the youth's assigned YTS notification of the decision through email and the YTS uploads the email notification in FACTS and describes the amount approved or denied, information relating to eligibility, and the remaining amount of ETV funds available for that youth. Applications are accepted on a weekly basis and complete application packets are processed each week utilizing a contracted fiscal agent.

In 2021, the ETV application requirements will remain the same as described above while being reviewed to identify what improvements can be made to eliminate any barriers to youth accessing funds timely and efficiently.

Receipts and Fiscal Accountability

The Youth Services Bureau has internal controls in place in an effort to ensure good fiscal accountability and includes the following:

- All requests for funding that are \$1,000.00 and over are payable to a single vendor through either a check or gift card must be reviewed and approved by the Youth Services Bureau Chief in addition to the initial review and approval by the Lead YTS or designated first reviewer.
- Requests for gift cards are issued in increments of less than \$500.00; however, if it is necessary for gift cards to be purchased in amounts greater than \$500.00, the youth's assigned YTS is responsible for accompanying the youth to make the purchase to ensure the funds are being expended appropriately. Also, no more than one gift card will be issued to a youth at any time.
- Youth are expected to turn in their receipts to their YTS within 30 days of receiving the check or gift card. If a gift card was issued, the youth must also return the gift card to their YTS along with the receipt for the items purchased. The YTS is expected to review all receipts to ensure they are complete and valid. This oversight has been implemented in an effort to prevent the inappropriate or fraudulent use of the funds. If a youth loses the receipt or is otherwise unable to produce one and/or does not provide the gift card issued, the youth is required to pay back the funds used. In addition, the youth will not be approved to receive additional ETV funding until the matter has been resolved.
- The Youth Services Business Operations Specialist assists in tracking ETV funds issued to providers and vendors on behalf of the youth and the submission of receipts as an additional internal control measure. The YSB Business Ops Specialist maintains weekly communication with the Lead YTS and/or designated reviewer concerning matters such as checks that have not been cashed within 90 days of being issued and possible discrepancies between purchases made and purchases approved.
- If it is discovered a youth has misused funds, notification is provided to the PSD Program Deputy Director, the PSD Administrative Deputy Director and the PSD Finance Unit Manager which outlines the incident and the proposed actions to remedy the situation. If intentional fraudulent use of funds is suspected, the Office of the State Auditor is also notified immediately by the PSD Administrative Deputy Director.

Challenges: Increasing the number of youth who receive ETV continues to remain a priority for the Youth Services Bureau. The primary challenge continues to be the limited number of youth who meet the eligibility criteria for the program. Unfortunately, youth involved in the state's child welfare system have low high school graduation and GED rates. Youth who are disconnected from education would benefit from supports and services focused on helping them

get on track academically and obtain their high school diploma or GED. For fiscal year 2019, New Mexico had 30 youth use ETV funds with 14 of those being first time recipients. In fiscal year 2020, New Mexico had 26 youth utilize ETV funds with 12 of those being first time recipients.

PSD plans to improve educational outcomes for youth through improving community partnerships with schools, colleges, and universities to equip eligible youth with the tools they need to be successful in post-secondary education. PSD plans to coordinate stakeholder meetings with community partners statewide in an effort to identify gaps, barriers, and solutions for improved educational outcomes. This will include coordinating with services in New Mexico that are focused on improving youth's education outcomes, such as the TRIO program, Back on Track programs, and Fostering Success programs. Additionally, New Mexico will better partner with financial aid offices, high schools, trade schools, GED programs, colleges, vocational settings, and universities to spread awareness of eligibility for ETV funds for eligible youth, as well as helping youth to maximize scholarship opportunities available.

Process to Ensure Total ETV Awards Do Not Exceed Total Cost of Attendance and to Avoid Duplication of ETV Benefits

The Youth Services Bureau has developed and maintains an Excel spreadsheet in order to track ETV application requests, approvals and denials. In order to accurately report the number of tribal youth who received ETV funds, youth who submit an application is identified in the spreadsheet as a tribal youth as applicable.

For each application a youth submits when requesting ETV funds, they are required to submit a current statement of the cost of attendance as well as a statement of their financial aid award from their post-secondary educational or vocational institution. The financial aid award is subtracted from the total cost of attendance to determine the unmet need of the student. The youth may be eligible for up to \$5,000.00 or the unmet need from the Cost of Attendance, whichever is the lesser of the two.

In addition, the ETV application includes a field that captures what other funds a youth has used previously and the purpose of those funds. This helps the Lead YTS and/or the designated reviewer to better assess whether the youth would be duplicating funds if that particular application was approved and to not exceed the total allowable amount for that particular youth.

In 2020-2024, PSD will continue to utilize the above methods to ensure the total amount of ETV funds do not exceed total cost of attendance and avoid duplication of ETV benefits.

Consultation with Tribes

All services provided to eligible New Mexico youth through the Chafee Program are also available to eligible youth who are or were under tribal social services custody. One of the Youth Services Bureau Supervisors is the designated point of contact and coordinator to receive and review tribal referrals. Referrals can be submitted on behalf of tribal youth by their tribal social

services worker, community service providers and schools. The Youth Services Bureau provides a copy of the referral form, updates on changes to the program, and updated YSB staff contact information to New Mexico tribal social service programs and points of contact to ensure eligible tribal youth receive the supports and services available through the Chafee Program.

Each year, the Youth Services Bureau staff participate in the New Mexico tribal IV-B meeting. During this meeting youth services staff discuss the services available to youth who age out of the tribal social services systems. This includes information on ETV funds, transition support services, and the Foster Youth Tuition and Fee Waiver. Youth Services staff ensure copies of referral forms, updates on changes to the program, and updated contact information are provided to tribal social services. This information is also provided upon the tribe or community service providers' request.

At this time, there have been no New Mexico tribes or pueblos that have requested to develop and implement an agreement to administer, supervise or oversee the Chafee Program with respect to eligible tribal youth or to receive an allocation of the state's allotment to do so.

Over the next five years Youth Services will explore methods in increasing collaboration to improve consultation and coordination of youth services.

In 2020-2024, PSD will continue to provide all youth services under the Chafee Program to eligible tribal youth.

Chafee Program Improvement Efforts

In an effort to improve outcomes for youth served by the Chafee Program and the state's child welfare system, youth and stakeholders have identified the following five areas:

- implementation of extended foster care;
- expansion of the housing service array;
- increased placement with relatives and siblings;
- supports and opportunities to reconnect with siblings and other relatives; and
- life skills development services.

Expansion of Housing Service Array: Youth, PS staff, and community partners continue to report the lack of available and affordable housing options for youth who have aged out of care. They also continue to report the housing they are able to secure is often not stable and are not always safe. In addition, housing options available specifically for our LGBTQ Youth and Developmentally Delayed Youth is very limited within the state.

- PSD and YSB will continue to participate in a needs assessment process with CYFD BHS staff as part of the agency's Youth Homelessness and Extended Foster Care work plan team in order to assist in the expansion of housing options for youth.
- PSD and YSB will continue to partner with the YHDP Grantee Team which is preparing to implement rapid housing program opportunities to youth in the 14 counties of Northern New Mexico.

- PSD and YSB will begin to explore partnerships with the CoC, local community based providers and housing authorities in order to make vouchers available to eligible youth through the Foster Youth to Independence Initiative.
- PSD and YSB will continue to partner and collaborate with New Day and Casa Q to improve access to housing for our LGBTQ youth who are both under and over the age of 18.

Increased Placement with Relatives and Siblings and Support and Opportunities to Reconnect with Siblings and other Relatives: Youth have continued to emphasize the importance and value of being placed with their relatives and siblings while in care. They have also expressed a need for assistance in reconnecting with their siblings and relatives after they have aged out of care.

- YSB will continue to work with the Center for Capacity Building, the Relative Care Team and the PSD Training Director to increase relative and sibling placements of youth who are in care. The efforts are a multi strategy approach which includes education and training of both new and seasoned PSD staff about the importance of such placements as well as strategies and opportunities to support the placements.
- PSD and YSB will use the newly available family finding tool, Seneca, to identify, locate and facilitate connections between youth and their relatives and siblings.

Life Skills Development: Youth continue to report they lack the basic life skills necessary for successful transition to adulthood once they age out of foster care. They also report they prefer and benefit more from one-on-one life skills training rather than attending life skills classes in a classroom setting.

- YSB staff will seek specific feedback from LUVYANM members and meeting participants about life skills priority areas and their recommendations for delivery modalities for the identified priority areas.
- YSB staff will continue to provide regionally based life skills development opportunities to youth and will focus on the life skills the youth in their regions are requesting.

YSB will continue to partner with the Heart Gallery to ensure there is at least once a month life skills development opportunities offered in the Albuquerque Metro Area for youth who reside in the area as well as youth who travel to Albuquerque for the monthly LUVYANM meetings.

Chafee Training

The PSD Training Director has been working with the agency's Academy for Professional Development and Training (APDT) to revise and update the New Employee Training (NET) curriculum delivered to new employees. NET includes a section focusing on youth and includes information about youth engagement, the importance of family connections, positive youth development and working with special youth populations such as pregnant and parenting youth as well as LGBTQ youth. Youth also serve as panel members during NET. Based on participant and youth panel member feedback, PSD staff have been working to revise this portion of FOP into a more interactive and role play format rather than the youth panel format.

PSD will use training funds provided under the title IV-E foster care and adoption assistance programs to provide training, including training on youth development, to help foster parents, adoptive parents, workers in group homes, and case managers understand and address the issues confronting youth preparing for a successful transition to adulthood and making a permanent connection with a caring adult. Training topics that have been identified to further explore include:

- Gangs and Youth Violence
- Navigating the Ansell Life Skills
- Human Trafficking
- Engagement and Building Rapport
- Driver Safety
- Permanency Planning
- Suicide Identification and Prevention
- Self-Harming
- Teen Substance Abuse
- Foster parent PRIDE training
- Events with legislators and policy makers
- Community partnership meetings
- Training to increase awareness and sensitivity in working with individuals who identify with diverse sexual orientation and gender identity expression.

PSD will continue to use Chafee funds to support the annual Independent Living Youth Conference, as well as youth advocacy and advisory events.

Inclusion and Involvement of Other Federally Funded Programs

Violence Against Women Act and Family Violence Prevention and Services Act (FVPSA)

Efforts to coordinate with the State's Violence Against Women Act Implementation Plan, Victims of Crime Act State plan, the Rape Prevention and Education State Plan and the FVPSA Plan happen at multiple levels of organization. The State of New Mexico Crime Victims' Reparation Commission (CVRC) 2017-2020 Statewide Implementation Plan was adopted on June 19, 2017 and is in effect as of this writing. A new statewide plan is being developed between the CVRC and CYFD. The plan provides for the following collaborations:

- Grant Allocation committees for FVPSA, VAWA, and VOCA grants always include members from all three administrative offices. The plans are reviewed and taken into account during funding allocations. The administrators have worked together to conduct joint program monitoring site visits, review of grant spending across all funding streams, coordination surrounding intersection of Domestic Violence, Child Advocacy Centers and

VOCA and VAWA funded projects. Regularly scheduled joint meetings are held between the funding offices along with other local funders (such as United Way and local government) focused on plans to make the system in New Mexico more effective and efficient.

- The Community Services Bureau has established on-going communication and coordination with the Department of Health, Sexual Violence Prevention program and have started to work on training and funding options in order to better utilize all available resources in the state as well as educate and increase the availability of service in more regions of New Mexico. This has the potential to expand prevention work and develop Domestic Violence agencies through the valuable networking opportunities professionally and through peer to peer support.
- The Community Services Bureau also is an integral part of the development of the CFSP as well as the development of the Families First Prevention Services Act Implementation planning. Coordination with this team includes the CAPTA, CBCAP and CJA state leads and has supported assessing and utilizing not only additional funding streams, but has supported the expansion of prevention work and development at Domestic Violence agencies in the area of child abuse prevention, substance abuse and mental/behavioral health across New Mexico.
- The New Mexico Coalition of Sexual Assault Programs are partners in many training opportunities such as annual conferences (Children's Law Institute and Advocacy In Action) which have hundreds of cross-discipline attendees from all areas of the state. These trainings have been offered consistently for many years and have established a reputation as being some of the most beneficial training opportunities in the state.
- New Mexico Department of Health, Sexual Violence Prevention, Office of Injury Prevention has worked with us to review shared funding options, coordination on common meetings and training opportunities, utilizing each other's strengths to improve monitoring and technical assistance to common funded agencies, strategies for creating new prevention programs in Domestic Violence and we participated in meetings with the CDC during their federal site visit.
- Regional county meetings have been held between local Child Protective services offices and the Domestic Violence agencies to specifically improve communication, relationships and services provided between CPS, CACs, and local Domestic Violence agencies as well as establish regular exchange of information and on-going joint local meetings.
- CYFD Child Protective Services, Behavioral Health, and Training Academy are implementing a multiyear strategic training plan with the Safe and Together Institute (S&TI) and National Center on Crime and Delinquency, Children's Research Center (NCCD, CRC). CYFD has implemented S&TI model into new staff training and will be rolling out statewide training in conjunction with NCCD to better serve families affected by Domestic Violence.

- The Administrative Office of the Courts, the NM Sentencing Commission and University of New Mexico, have partnered with CYFD on the program improvement plan to review spending and utilization patterns within the Domestic Violence Offender Treatment and Intervention Programs. The University of New Mexico, Master's in Public Policy program, as well as the Corrine Wolfe Law Center have become key partners in the long term strategy with CPS and Domestic Violence. UNM has also been a major partner in data collection, review and assessment to support changes in programming and development of meaningful performance outcomes related to Batterer Intervention programs and support.

Affordable Care Act (Medicaid to 26)

- By agreement with CMS, since 2014, CYFD continues to manage the process of enrolling youth who emancipate from care in Medicaid. This has been put into place and is entered into the SACWIS system. Medicaid staff continue to determine Medicaid for youth moving from other states to New Mexico.
- PSD also provides youth with Chafee Medicaid who aged out of foster care at 18 but who did not receive Medicaid at 18. PSD continues to provide Medicaid to eligible former foster youth who move to New Mexico from another state.

Reducing the Risk of Human Trafficking

- In 2018 Youth Services Bureau started attending the Attorney General's taskforce youth subcommittee meeting. "Spoken For" provided a training on how to identify victims of sex and human trafficking as well as how to best engage youth who are potential victims. "Spoken For" is a program in Albuquerque that helps rescue, provides after care, and advocates for sex trafficking victims.
- Identification of DMST youth will occur through the widespread utilization of West Coast Children's Clinic's (West Coast) Commercial Sexual Exploitation – Identification Tool (CSE-IT). The content of the CSE-IT (including all versions of the tool and user manuals) is based on research conducted by West Coast and partner agencies. West Coast gathered data through focus groups, interviews, and expert reviews from over 100 survivors and CSEC providers, in addition to reviewing existing screening tools and literature on risk factors and indicators of commercial sexual exploitation. CYFD has purchased the ability to train both line level CYFD PS and JJS staff and BHS providers who work with CYFD youth in the use of this tool. This tool will be utilized to educate youth and staff working with them on how to refer to proper trauma informed services in the community.
- Two residential facilities for commercially sexually exploited youth are in the process of established in SFY 2021. BHS is also working with Bernalillo County on setting up a Safe Home for survivors of trafficking to stay and transition to the proper identified service or

residence. The Safe Home will be available for a 90 day transition period and address in a trauma informed manner the needs of the individual.

- CYFD BHS requested and was allocated capital outlay funds in the 2020 Legislative Session for a safe home for child survivors of sex trafficking. Additional expansion funds were allocated that CYFD BHS will dedicate for programming at this facility. The division is working to identify and secure a location for these funds. CYFD BHSD was also awarded capital outlay funds from Bernalillo County for the purchase of a home for child survivors of child sex trafficking. It previously secured programming funds for this facility. CYFD BHS are collaborating with Bernalillo County to identify a building to purchase for this program. CYFD continues to vet locations and have meetings with possible service providers. These facilities will offer a full array of services and supports to females and males ages 12 to 18 who have a history being trafficked.

6. Consultation and Coordination between the State and Tribes

The 2020-2024 plan was developed after a series of weekly meetings with stakeholders over a two month period. Tribal entities that were able to attend some of the meetings were: Navajo Nation, (Michele Jones), Pueblo of Zuni (Betty Nez) and Pueblo of Acoma (Donalyn Sarracino). After each stakeholder meeting notes were sent out through e-mail to be distributed for additional input and feedback. PSD utilized the Indian Affairs Department to assist in sending out invitations each of the tribes and pueblos for the PSD stakeholder meetings. The stakeholder meetings were also advertised in the Indian Affairs Department's newsletter. Below is a list of our tribal partners:

<u>Tribe or Pueblo</u>	<u>Representative</u>
Pueblo of Acoma	Governor Fred S. Vallo, Sr, Donalyn Sarracino, Sharon Young
Pueblo of Cochiti	Governor Joseph H. Suina
Pueblo of Isleta	Governor E. Paul Torres, Caroline Dartez
Pueblo of Jemez	Governor Joshua Madalena, Carla Sandia, Hennetta A. Gachupin
Pueblo of Laguna	Governor Richard B. Luarkie, Marie Alarid
Pueblo of Nambe	Governor Phillip A. Perez, Venus Mongofeds
Ohkay Owingeh	Governor Marcelino Aquino, Rodelle Thompson
Pueblo of Picuris	Governor Richard Mermojo
Pueblo of Pojoaque	Governor George Rivera
Pueblo of San Felipe	Governor Joseph E. Sandoval, Darlene J. Valencia
Pueblo of San Ildefonso	Governor Terry L. Aguilar, Sharon Serrano, Julie Sanchez
Pueblo of Sandia	Governor Stuart Paisano, Randall Berner, Kimberly Lorenzini
Pueblo of Santa Ana	Governor George M. Montoya, Nathan Tsosie
Pueblo of Santa Clara	Governor J. Michael Chavarria, Jacque Wright, Julie Bird, Terri Chavarria
Pueblo of Santo Domingo	Governor Oscar K. Lovato, Tori Garnat
Pueblo of Taos	Governor Clyde M. Romero, Ezra Bayles, Helena Concha
Pueblo of Tesuque	Governor Robert Mora, Sr., Jeannette Jagles
Pueblo of Zia	Governor David Pino, Victoria Herrera

Pueblo of Zuni	Governor Arlen P. Quetawki, Sr., Betty Nez, Marla Fastwolf
Jicarilla Apache Nation	President Ty Vicenti, Hilda Petago, Karen Keating, Susan Thompson, Rubesan Sandoval, Olivia Nelson, Violet Garcia
Mescalero Apache Tribe	President Danny Breuninger, Sr.
Navajo Nation	President Ben Shelly, Regina Yazzie, Irene Eldridge, Michele Jones
Navajo Nation Council	Johnny Naize
All Pueblo Council of Governors	Chairman Terry L. Aguilar (San Ildefonso Pueblo) and Secretary Vincent Toya, Sr. (Jemez Pueblo)
Five Sandoval Indian Pueblos	Director James Roger Madalena
Eight Northern Indian Pueblos Council	Executive Director Gil L. Vigil
Ramah Navajo	Vera Beaver, Loretta Martinez, Jemlisa Raplult
Southern Ute	Ann Hale

Information obtained from the stakeholder meetings and Title IV-B tribal meeting was utilized to develop PSD's strengths, challenges and assisted in identifying goals for our Plan for Improvement. Over the next five years, PSD plans to hold monthly stakeholder meetings to obtain ongoing feedback and assist in identifying strengths, challenges and progress towards goals.

PSD will share the CFSP with tribal partners through the Native American Liaison and tribal contacts.

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

- Tribal-State Judicial Consortium – the purpose of the tribal consortium is to build closer relationships between the state and tribal courts and enhance communications. PSD attends quarterly meetings as an interested party. Subcommittees address state services for tribal children, full faith and credit, collaboration and compliance with ICWA.
- Indian Child Welfare Protection conference planning committee – conference coordinated in collaboration between CYFD, BIA, community partners and tribes around the state.
- PSD presentation at the yearly Tribal Title IV-B, includes presentations on Title IV-E, Chaffee funds, ETV funds and obtaining feedback from tribal partners.
- IGA's – Ongoing discussions with PSD and tribes around the state to address the option of entering into an IGA that addresses tribal licensing. One goal of the IGA is to increase ICWA preferential placements by partnering with tribes to increase licensing of tribal foster families. Currently for a foster family to be licensed by a tribal entity, CYFD is required to enter into Intergovernmental agreements (IGA) with the tribe.
- Quarterly IGA meetings with Navajo Nation to discuss the roles and responsibilities of the Nation and the state for ensuring ICWA placement preference for Indian children.
- Quarterly ICWA staffings with Navajo Nations, so children outcomes can be achieved more timely.

- PSD notification to tribes when children come into care and ongoing partnering with the tribe during the time the child is in custody.
- IV-E unit provides ongoing collaboration, training and technical assistance with tribes, pueblos and the Nation in the area of IV-E.
- PSD partners with CCIC cross-training grant to ensure tribal representatives are invited to all training events and topics are relevant to tribal partners.
- PSD participates in the BIA-Tribal Social Services quarterly meetings on ICWA coordination issues and concerns in order to jointly address children and family issues.
- PSD utilizes our CYFD Native American liaison to assist in facilitation and mediation of some staffings, provide information to out of state tribes and assist with tribal requests for home studies for off reservation homes.
- PSD has identified a PSD Title IV-E staff person to be the designated primary contact for eligibility determinations, questions, consultations and technical assistance or training regarding children in tribal custody. Templates have also been developed for court orders in tribal court to incorporate the required language in the order to determine IV-E eligibility.
- Tribal youth are eligible for the same services under the Chafee Foster Care Independence Program and Education and Training Voucher Program as youth in the custody of the state.

The CYFD Native American Liaison, the Federal Reporting Bureau Chief, and the Title IV-E Manager are responsible for dissemination of information to the tribes and pueblos. They are also responsible for coordination of collaboration efforts with the tribes and pueblos. PS maintains either Joint Power Agreements (JPAs) and/or Intergovernmental Agreements (IGAs) with several of the tribes and pueblos in the state. Since June 2016, PSD has received requests to enter a JPA with the Pueblo of Zia, the Mescalero Apache tribe, and the Ramah Navajo Chapter.

Several meetings were held during the last year with Ramah Navajo, PSD, and the Navajo Nation to discuss Ramah's request to enter into a JPA separate from the larger Navajo Nation. Ramah is also requesting to be a sub-contractor for the Social Security Block Grant; currently, the Navajo Nation receives SSBG funding but Ramah asserts that none of that money is being utilized for social service programs at Ramah Navajo, and that they should have their own contract for funding. Ramah Navajo has obtained technical assistance from PS on the process for becoming their own IV-E agency, and Ramah has obtained assistance from the Casey Foundation as well. PS plans to continue to support both entities, the Navajo Nation and Ramah Navajo, through this process.

In 2020-24, recognizing that because NM has the second-highest population per capita of Tribal individuals in the country, CYFD is working in collaboration with the Tribes and the courts to create an ICWA court. PSD is also creating a dedicated ICWA team.

Technical assistance will be available and provided for the tribes and pueblos through the Title IV-E Unit. PSD has assigned an IV-E Specialist to work directly with the tribes and pueblos for all IV-E reimbursements as well as technical assistance and training when requested. On-site

trainings were provided this year to Mescalero Apache, Ramah Navajo, Acoma, and Zuni by the IV-E unit.

All training opportunities offered to PS staff continue to be offered to tribal and pueblo staff. PSD disseminates information on trainings through emails and through the Tribal ICWA Consortium. PSD communicates with the Consortium coordinator and presents to the Consortium when asked. PSD has recently been invited to become a regular attendee at the Consortium meetings. PSD will attend a portion of each quarterly Consortium meeting to provide information, receive questions and feedback, and further collaboration efforts with tribal stakeholders.

PSD is committed to continuing to collaborate with the tribal and pueblo stakeholders of NM. Efforts to include tribal stakeholders include assignment of one IV-E Specialist to tribal cases; consultation and training with the IV-E Manager and Federal Reporting Bureau Chief, and involvement in the development of new PSD procedures.

Provide a description on the arrangements made with tribes as to who is responsible for providing the child welfare services and protections for tribal children, whether the children are under state or tribal jurisdiction. These services and protections include operation of a case review system for children in foster care; a pre-placement preventive services program for children at risk of entering foster care to remain safely with their families; and a service program for children in foster care to facilitate reunification with their families, when safe and appropriate, or to place a child in an adoptive home, legal guardianship or other planned, permanent living arrangement subject to additional requirements.

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

- Notification of Indian parents and Tribes of State proceedings involving Indian children and their right to intervene: PSD Intake Policy (8.10.2.14 NMAC); PSD Investigation Policy (8.10.3.15 NMAC; 8.10.3.16 NMAC); PSD Legal Services Policy (8.10.7.27 NMAC); NM Children's Code Abuse & Neglect Act 32A-4-6 NMSA 1978 (Taking into custody), 32A-4-22 NMSA 1978 (Disposition of adjudicated abused or neglected child);
- Placement preferences of Indian children in foster care, pre-adoptive, and adoptive homes: PSD Legal Services Policy (8.10.7.27 NMAC); PSD Permanency Planning Policy (8.10.3.11 NMAC); PSD Adoption Act Regulations (8.26.3.44 NMAC); NM Children's Code Abuse & Neglect Act 32A-4-9 NMSA 1978 (Indian child placement preferences), 32A-4-21 NMSA 1978 (Neglect or abuse predisposition studies...), 32A-4-22 NMSA 1978 (Disposition of adjudicated abused or neglected child); Children's Code Adoptions Act 32A-5-4 NMSA 1978 (Application of federal Indian Child Welfare Act of 1978), 32A-5-5 NMSA 1978 (Indian child placement preferences);

- Active efforts to prevent the breakup of the Indian family when parties seek to place a child in foster care or for adoption: PSD Permanency Planning Policy (8.10.8.19 NMAC); NM Children's Code Abuse & Neglect Act 32A-4-24 NMSA 1978 (Periodic Review of dispositional judgments), 32A-4-28 NMSA 1978 (Termination of parental rights; adoption decree), 32A-4-20 NMSA 1978 (Termination procedure); NM Children's Code Adoptions Act 32A-5-4 NMSA 1978 (Application of federal Indian Child Welfare Act of 1978), 32A-5-5 NMSA 1978 (Indian child placement preferences);
- Tribal right to intervene in State proceedings or transfer proceedings to the jurisdiction of the tribe: PSD Legal Services Policy (8.10.7.27 NMAC); NM Children's Code Abuse & Neglect Act 32A-4-6 NMSA 1978 (Taking into custody), 32A-4-27 NMSA 1978 (Intervention; persons permitted to intervene).

Provide a description, developed after consultation with tribes, of the specific measures taken by the state to comply with ICWA.

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

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

PSD is still in the process of updating policies and procedures to be in line with the new ICWA regulations. PSD convened a workgroup in the summer and fall of 2016 that included key PSD staff as well as tribal and pueblo stakeholders. This workgroup stopped meeting when the Federal Reporting Bureau Chief position turned over, and needs to be re-convened so that the Policy and Procedure can be finalized.

Mandatory ICWA training is still required for all PSD staff.

PSD attends the annual State of NM Tribal Leadership Summit to participate in a question-and-answer session and to provide technical assistance to the Pueblos and Tribes attending the Summit. The Summit provides an opportunity to directly communicate with tribal governmental leadership about PSD initiatives, as opposed to the only communicating with tribal social services representatives, which PSD maintains frequent communication.

Each month the Quality Assurance team conducts a legal review of practice in a different county throughout the year. In this review, one of the many data points captured pertains specifically to

ICWA compliance. The process includes a review of the hard copy legal records, a FACTS review, and meetings with the Children's Court Attorney and/or Managing Attorney. The reviews are conducted by a QA Specialist and a peer review that include the Regional Children's Court Attorney, the assigned Children's Court Attorney, and a Title IV-E Specialist. The intent of the review is to determine the strengths and challenges from the legal perspective and to identify opportunities for improved collaboration between legal services and program.

CYFD has also engaged New Mexico's tribes and pueblos in its MMIS redesign, particularly with regards to the youth services delivered to tribes upon request.

CYFD is also working with tribes to pilot a community based mental health service for at risk youth on tribal land in the next 12 months as part of our statewide effort to rebuild community based mental health services in New Mexico.

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

Intergovernmental Agreements through Joint Powers

The CYFD Native American Liaison, the Federal Reporting Bureau Chief, and the Title IV-E Manager are responsible for dissemination of information to the tribes and pueblos. They are also responsible for coordination of collaboration efforts with the tribes and pueblos. PS maintains either Joint Power Agreements (JPAs) and/or Intergovernmental Agreements (IGAs) with several of the tribes and pueblos in the state. Since June 2016, PSD has received requests to enter a JPA with the Pueblo of Zia, the Mescalero Apache tribe, and the Ramah Navajo Chapter. Several meetings were held during the last year with Ramah Navajo, PSD, and the Navajo Nation to discuss Ramah's request to enter into a JPA separate from the larger Navajo Nation. Ramah is also requesting to be a sub-contractor for the Social Security Block Grant; currently, the Navajo Nation receives SSBG funding but Ramah asserts that none of that money is being utilized for social service programs at Ramah Navajo, and that they should have their own contract for funding. Ramah Navajo has obtained technical assistance from PS on the process for becoming their own IV-E agency, and Ramah has obtained assistance from the Casey Foundation as well. PS plans to continue to support both entities, the Navajo Nation and Ramah Navajo, through this process.

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Section D. CAPTA State Plan Requirements & Updates

Use of Funds

During the reporting period, CAPTA State Grant funds were primarily used alone, without combination with other federal funds. There was coordination PSSF Title IV-B subpart 2 expenditures as well as state general funds to support the implementation of Safety Organized Practice through collaboration with National Center on Crime and Delinquency. Funds were also applied to development of the FACTS system.

There are changes from the state's previously approved CAPTA plan in how PSD coordinates programs and funding streams to provide for a comprehensive approach to service delivery. Activities, services and training supported with CAPTA grant funding are identified below. The following table outlines the status of the activities that New Mexico carried out with its CAPTA State Grant funds in the previous year, as well as activities intended to be carried out in the upcoming year.

Activity/Service/Training	2020 Status	Corresponding CAPTA Program Area
Continued support for maintenance of FACTS, the system used by PSD to track reports of child abuse and neglect from intake through final disposition and allows interstate and intrastate information exchange.	On-going: PSD anticipates use of funds in for basic maintenance of FACST as we transition to CCWIS in 2020 and future years.	Program Area 5
During the 2019 Legislative Session, a law was passed required CYFD to develop and implement Differential Response.	CYFD will be developing an implantation plan to begin piloting Differential Response in 2 counties in FY21.	Program Area 4
Provide training to foster parents, staff and other stakeholders at the New Mexico's Children's Law Institute (CLI), on the prevention of human trafficking and the prudent parent standards as outlined in the Preventing Sex Trafficking and Strengthening Families Act (P.L. 113-183)	Support attendance and participation of PSD staff and foster parents (CPS workers and children's court attorneys) at the annual conference held in January 2019. Will continue to support attendance and participation at the January 2020 institute and annual CLI thereafter. A specific track is provided on Preventing & Responding to Sex Trafficking at the CLI Conference.	Program Areas 2, 6, 7
Provide training to staff and other stakeholders throughout the year on the cross section of Domestic Violence and Protective Services using the Safe and Together Model. Training is provided in person, online, and through coaching and consultation.	On-going: PSD has entered into contracts with Safe and Together Institute. Multiple trainings are scheduled in locations throughout the state with direct staff, supervisors, and management and training coaches, along with program evaluation following trainings.	Program Areas 3, 4, 8 and 14
Develop tracking mechanism for CARA Plans of Safe Care and training.	On-going	Program Area 2, 3, 6

Substitute Care Council Recommendations

In accordance with statutory obligations, PSD conducted meetings and gathered input from substitute care review boards (i.e. Councils) to assess the effectiveness of substitute care. In order to examine the system of care, the Council garnered guidance and information for current research to understand best practices. Based on this research and the Council's evaluation of

CYFD's effectiveness, the following recommendations were developed towards the improvement of the protective services system of care. For further detail regarding the Council's work, findings and recommendations, please refer to the attached report entitled "Substitute Care Advisory Council Annual Report."

Council Recommendations:

Legislature:

- Change member eligibility language in the NMSA 1978, Section 32A-8-1 et seq., Citizen Substitute Care Review Act 32A-8-5(C) to read: "A person who is employed, or a relative in the first degree of consanguinity or through marriage by the first degree of affinity of a person employed, by the children, youth and families department protective services division, a district court or a member of the Council shall not serve on a substitute care review board".
- Add language to NMSA 1978, Section 32A-8-1 et seq., Citizen Substitute Care Review Act to read: "the department of children, youth and families shall provide direct access to information deemed necessary by the Council to fulfill state and federal mandates."

Regulation & Licensing Department & Children, Youth and Families Department:

- Until the Act is changed, revise the Joint Powers Agreement between the Children, Youth and Families Department and the Regulation and Licensing Department to include direct access to information deemed necessary by the Council to fulfill state and federal mandates and timelines to provide said information.

Children, Youth and Families Department:

- Revise 8.10.8.29 Court Appointed Special Advocate (CASA) and Citizen Review Board (CRB) and 8.10.8 NMAC PR 29 (5) Substitute Care Review to reflect the Substitute Care Advisory Council's purpose, information to be provided to the Council, to include who provides the information, when to provide the information and how the information provided is tracked.
- Revise 8.10.3 PR 18 to include (1) independent team review for cases in which there have been two previous investigations, (2) established timelines to conduct and conclude the review, (3) specific considerations during the review and (4) documentation of the conclusions of the review and the impact on the determination of the current investigation.
- Create and distribute work plans for: Implementation of the Safety Organized Practice model including measurable objectives and evaluation and specific assessments for Trial Home Visits, best placement for any substitute care placement. Case planning for

children in custody of CYFD to include measurable objectives, evaluation and specific formats for Transition Home Plans, Life Skills Plans and Individualized Adoption Plans.

- Provide documentation of psychotropic medication oversight as described in 8.10.8 NMAC PR 17(7).

Council:

- Provide more frequent reports and promote solution-focused discussions that lead to measurable actions.
- Prioritize the monitoring of state and federal initiatives related to the safety of children in substitute care.
- Collaborate with stakeholders to provide a national conference with opportunities to showcase the work being done in New Mexico and to learn from other states.

Final Report on CARA PIP

The following PIP serves as New Mexico's plan to address the needs of infants who have been exposed prenatally to drugs or experiencing resulting withdrawal symptoms of Fetal Alcohol Spectrum Disorder.

CARA PIP Item 1: Develop a process for identifying and tracking infants affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder.

A system for identifying and tracking infants affected by SUD has been created by the CARA workgroup. In our plan, health care providers involved in the delivery of the newborn would assess at delivery whether or not a plan of safe care, which will be called a "Plan of Care," is required. Health care professionals may utilize the form entitled "Assessment for Plan of Care" (Attachment D) for guidance on whether or not the plan of care is required. Once the plan of care is developed, the health care professional would develop the Plan of Care (Attachment E, Plan of Care template). The Plan of Care is intended to be a working document that is completed by the health care professional with the participation of the caregivers of the child. The Plan of Care will then be provided electronically to two locations: one copy to CYFD, and one copy to the Care Coordinator assigned through the families managed care organization. The Care Coordinator will be tasked with ensuring that the infant's primary care physician also has a copy of the Plan. An additional copy of the plan of care will also be shared between CYFD and the Department of Health, Children's Medical Services, Family Health Bureau (CMS).

Once the Plan of Care is established and sent to the MCO Care Coordinator, the Care Coordinator will be responsible for ensuring the family is linked to any services listed on the Plan

of Care. It is recommended that all referrals to service providers and resources be handled as a warm hand-off.

CMS will be providing monitoring and care coordination for families who are Medicaid-exempt. Native American families have the option of not being assigned to a fixed MCO in New Mexico; and are referred to as “exempt.” Given that more than 10% of New Mexico’s population is Native American, we wanted to ensure that all families have equal access to Plans of Care and the supports provided. CMS will be able to fill this gap.

CARA PIP Item 2: Identify process for the development and tracking of safe care plans to address the health and substance use disorder treatment needs of substance exposed infant and their families or caretakers.

Plans of Care will be created before discharge from the hospital. All delivery sites in the state will be trained on how to create the Plans of Care, and where to send the Plan of Care once it is established. Extensive training has already taken place; additional trainings are planned for the remainder of calendar year 2019. Tracking will occur through CYFD Protective Services Division as well as the New Mexico Department of Health, Children’s Medical Services.

CARA PIP Item 3: In addition to development and monitoring of safe care plan, New Mexico will develop a process to track when and how referrals are being made for services to support those substance-exposed infants and their families or caretakers.

All Plans of Care, once developed, will be copied to CYFD for data collection purposes. They will be screened to track when and how referrals for services are being made to address the specific needs of the substance exposed newborn and their families. The data, in de-identified form, will be shared between CYFD, Department of Health/Children’s Medical Services, and Human Services Department/Medicaid Division. This data will help CYFD, Department of Health, and the Human Services Division work collaboratively to identify gaps in services statewide. With this information, the state can work to build better community supports for families affected by substance use disorders. Additional data will also be collected on the Plans of Care, including referrals to other types of services. This may include housing programs, domestic violence interventions and supports, and behavioral health treatment. This additional data is also considered necessary to collect, so as to ensure we are identifying gaps in community resources and services and can work towards building access to resources for families. The data will be added to the Resource Mapping that is being maintained by the CARA Workgroup, and will assist the State in working towards a more uniform behavioral health care system.

CARA PIP Item 4: Governor’s Assurances certifying the state is compliant with P.L. 114-198, the Comprehensive Addiction and Recovery Act of 2016.
New Mexico submitted a Governor’s Assurance in 2018.

Section E. Updates to Targeted Plans within the 2020-2024 CFSP

Foster and Adoptive Parent Diligent Recruitment Plan

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

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

While there is a statewide Diligent Recruitment Plan, each county is responsible for their own specific recruitment plan. Each county has been provided with a Targeted Recruitment Planning Tool which can be seen attached to the 2020-2024 CFSP report. Each county plan covers the following:

- Who are the children and youth currently in the county's care?
- Who are the county's current kin, foster and adoptive parents?
- Who are the children and youth currently most in need of homes?
- What is the county's recruitment target?
- Attracting more families that your current successful resource families
- Recruitment Outreach
- How will the county support and retain resource families?
- Retention and Recruitment Goals
- Strategies
- Action Plans
- Monthly Evaluation Tool

Specific elements, challenges and strategies for the statewide foster and adoptive parent diligent recruitment plan are presented below.

The following comprehensive foster parent recruitment and retention plan includes recruitment and retention of foster families from the time of inquiry, licensure and first placement. This plan will be accomplished in collaboration with the Foster Care and Adoptions Bureau (FAB), Regional Managers (RM), County Office Managers (COM), Placement Workers (PW), Navigators, County Based Recruitment Teams (CRBT) internal support services and external vendors via contracts. This plan will include an objective, goals to achieve the plan, action steps for each goal, responsible persons for each action step and time frame as to when each goal is to be accomplished.

FOSTER PARENT DILIGENT RECRUITMENT PLAN

Objective: Expand the number of foster and adoptive resources to ensure that each child needing foster care placement has at least two potential placements that reflect their need for the least restrictive and most appropriate environment.

Goal 1: Ensure FACTS Data is entered timely and accurately.

Analyze FACTS data for accuracy and the tools used by the field to assist in FACTS data entry.

The Foster Care and Adoptions Bureau (FAB) in collaboration with PS Research, Assessment, and Data Bureau (RAD) will develop a plan to analyze FACTS data for inaccuracies and areas of improvement as well as the tools the field uses to assist with accurate FACTS data entry. FAB will collaborate with the FACTS Support Unit and County Placement Staff to implement a plan for Placement staff to attend training that will demonstrate how and when data shall be entered into FACTS. FAB has recently hired the Foster Care Placement Agent who is currently developing a Quality Assurance plan with the Title IV-E unit and the Data unit to ensure that we can assist the COMs and Placement Supervisors monitor the timeliness and accuracy of their PWs FACTS data entry.

FAB along with PS Leadership will research the use of WEB-BASED APPLICATION, a foster care software that assists in tracking inquiries, online applications, application approvals, other required paperwork and status of licensure, so that placement staff spend more time with families rather than paperwork.

Goal 1 Action Steps, Responsible Persons and Time Frame

FAB Responsibilities

- FAB will work with RAD to gather data and identify what areas are being entered incorrectly and what other information is missing from FACTS to develop a curriculum to provide technical assistance and support to field staff.
- FAB will discover how and to what capacity the FACTS Support Unit is able to assist in achieving this goal.
- FAB will meet with RMs, COMs and Placement Supervisors via Go To Meetings to discuss what in FACTS needs to be reviewed, how data is to be entered into FACTS and how Supervisors and COMs will monitor their Placement Workers (PW) entries into FACTS.
- FAB will check in with RAD Bureau to extract identified data to ensure areas identified are improving.

FAB will check in with COMs and Placement Supervisors every two weeks to see where it is they need technical assistance

Placement Staff Responsibilities

- RMs, COMs and Placement Supervisors will attend all scheduled planning and training meetings.
- PWs will attend all scheduled training meetings.
- COMs and Placement Supervisors will work with PWs and FACTS Support staff and start correcting data entered into FACTS.
- COMs and Placement Supervisors will monitor how PWs are entering data into FACTS on a monthly basis.
- RMs, COMs and Placement Supervisors will attend all scheduled planning and training meetings.

PWs will attend all scheduled trainings and meetings.

RAD Staff Responsibilities

- RAD Staff will assist the FAB in identifying FACTS inaccuracies.
- RAD will provide FAB with monthly reports.
- RAD and FAB will schedule monthly meetings with COMs and Placement Supervisors to review reports.

FACTS Specialists Responsibilities

- FACTS Specialists will assist the FAB with FACTS Placement Data entry training.
- FACTS Specialists will assist Placement Staff in correcting, expunging and accessing data in FACTS.

FACTS Unit will conduct training on how to enter data into FACTS

Time Frame

This goal and its activities shall be completed on or before January 1, 2018

Goal 2: License Foster Homes within 120 days

95% of all foster homes will be licensed within 120 days from date of application. See Appendix A for baseline data by county.

It is the CYFD's goal to ensure that individuals and/or families that have successfully submitted an application to become a Foster Parent are licensed within one hundred and twenty (120) days. Those interested in becoming a foster parent are initially tracked in FACTS as an intake. It is during this time frame that the employed and contracted Navigators provide support to prospective foster parents. The 120 days does start until an application has been submitted, approved and a pending application is created in FACTS.

Tools and resources that help Placement Staff keep track of what phase their prospective foster family/parent is in the licensing process include:

- Facts
- Five FTE Regional Navigators
- Eight Contracted Navigators (1 pending contract)
- KEVIN Reports based on Navigators tracking tools
- Home Study Contractors
- ROM
- Online web portal for applicants
- Supervision
- Desktop reports
- Web-based Team Dashboard
- FAB monthly home study referral report

CYFD's IT Unit has recently launched in each CYFD Region a web based dashboard that extracts data entered into FACTS and helps Placement Staff from RMs, COMs, Placement Supervisors and PWs see their current open/active licenses. The Dashboard includes the following features:

- Provisional Licenses
- Recertification of Licenses
- Pending Licenses

Each of these "cards" informs the RM, COM, Placement Supervisor, and PW what phase they are in with each potential foster parent applicant and licensed applicant. The Dashboard has a built in reminder and timeline that alerts the PW when a provisional, recertification and pending license is about to expire. FAB will partner with CYFD's IT Unit to enhance the capabilities of the Regionals newly implemented Team Dashboards..

PS is in the research phase of an online web portal for prospective foster and adoptive parents. The focus is on alleviating the critical shortage of foster parents by building foster family approval software. We are looking for a web-based software that empowers families to complete their applications online and can save placement staff time by providing a robust workflow tool to manage the application process. Prospective Foster Care applicants are able to follow where they are in the licensing process.

Goal 2 Action Steps, Responsible Persons and Time Frame

FAB Responsibilities

- FAB will work with PS Leadership and IT to investigate the use of Web-based application for improved tracking of foster parents.
- FAB Staff responds and accepts inquiries that come in through the 800 line, email from cyfd.org website to Central office.
- FAB Staff enter inquiries into FACTS and assign to Navigators within one business day.
- FAB will develop mechanism to screen inquiries so that applicants are appropriately referred.
- Navigators contact and provide prospective foster family licensing information and upcoming informational meeting dates within two business days.
- Navigators shall maintain contact with prospective foster family to provide support and guidance with application other licensing questions until application is received or withdrawn within 60-90 days.
- Upon receiving a completed application the assigned Navigator creates a provider record in FACTS and assigns the provider record to the Placement Supervisor for approval of application and placement worker assignment.
- Navigators notify prospective foster families when their application has been approved by the Placement Supervisor and provides the prospective foster family their placement workers contact information.
- Navigators will provide their Tracking Tool data for each prospective foster family to their designated Supervisor to ensure that the data has been entered into FACTS.
- Navigators will utilize placement dashboards to help Placement Staff track their pending licenses.
- FAB's CRC Unit shall process Provisional CRC applications within 48 hours and Regular CRC applications within seven 7 business days of receiving emailed requests from county offices.
- FAB shall monitor Home Study contract to ensure contractor is completing home studies for county offices within 90 days of referral.
- FAB Staff will review all home study denials being conducted by the home study contractor.
- FAB will meet with Home Study contractor monthly to discuss issues or concerns with these home studies.
- FAB's Foster Care Program Specialist will work with IT to ensure the inquiries on the "Intake Tab" are represented within the placement dashboard for the purpose of tracking inquiring families and monitoring their timeframes to turn in an application and be made into an actual provider record.

Placement Staff Responsibilities

- Placement Supervisors after approving an application, will assign the prospective foster family to a PW in FACTS within 1 business day.

- The PW shall within 2 days of being assigned a provider creates a pending license for the provider in FACTS to initiate the home study process.
- The PW shall within 2 days of being assigned and creating a pending license shall:
 - Register applicant(s) to be fingerprinted and
 - Schedule an initial consultation with the prospective foster family to provide them with physical forms, required training information and fingerprint registration receipt.
- Once applicants have been fingerprinted Placement Staff shall email required documentation to FAB's CRC Unit to have applicants background check processed.
- Once Placement Staff receives background check clearance letter(s) they shall within two days refer applicant(s) to Home Study Contractor and/or determine if Home study will be conducted in house (Provisional).
- Placement Staff shall start the Home Study Process if in house. If contracted out the assigned PW shall maintain contact with their prospective FP bi-weekly until Home Study is completed.
- Placement Staff shall review draft home studies from contractor within 5 business days of being provided the draft.
- Placement Staff through the web-based Placement Dashboards shall monitor the progress of their Pending Licenses every 2 weeks.
- Placement Supervisors shall through supervision and the use of Placement Dashboards monitor their Teams pending licenses every 30 days and provide a monthly update to their COM.
- COMs and RMs shall monitor the Regional Placement Dashboard every 30 days to review pending licenses.
- PW shall follow up with prospective FP every 2 weeks for the first 60 days to check on the status of required training and required documentation. After 60 days follow up shall occur weekly.
- Placement Staff shall utilize Navigators when necessary to follow up with prospective foster parents.
- PW will create license within 2 days or sooner in FACTS and provide support to FP.

Goal 3: Increase the Number Licensed Foster Parent Homes

CYFD Placement Staff shall increase the number of Licensed Foster Parent Homes statewide by 15%. See Appendix A for baseline data by county. **The percentage for each county will vary based on the need to increase the number of licensed foster homes within that county. Please refer to Appendix A; Column 3 to review the % needed to increase by county. **

Each county's recruitment plan shall be data driven. Targeted recruitment requires a county-based readiness assessment through comprehensive data analysis. The readiness assessment identifies the child's specific age, gender, race/ethnicity, special needs, and sibling group among some of the characteristics. The readiness assessment also helps to gather needed data regarding current foster family characteristics.

Targeted recruitment planning tool worksheets (See Attached) shall be utilized in the development of a county based targeted recruitment/retention (RR) plan. Development of a targeted RR plan assists each county in identifying their current foster home resources and helps to determine which types of families they need to focus recruitment efforts in order to meet the needs of children in care. A good recruitment plan not only helps identify appropriate providers to children in CYFD custody, but may avoid additional foster care moves and subsequent trauma that is caused by numerous foster care moves.

CYFD's IT Unit has recently launched in each Region a web based dashboard that extracts data entered into FACTS and helps PSD Workers from RMs, COMs, Placement Supervisors and PWs see their current "Providers." The providers are the current licensed foster parents. The My Providers Dashboard is able to filter which providers are available by worker, team and region. The My Providers Dashboard includes and breaks down provider data into the following tables:

1. Application Pending Providers
2. Active Licensed Providers
 - a. Capacity of placement per provider
 - b. # of placements per provider
 - c. Includes the various characteristics such as gender, sibling group, child specific age etc.
3. Active Unlicensed Providers (Adoptive Homes) can be used for recruitment.

During the recruitment development and process, counties may find 1) relatives who are interested, but are unsure of the process and/or are unable to complete the licensing process, 2) individuals that are only interested in Adoption and/or 3) licensed foster parents that have not had a placement for an extended period of time. CBRT's with FAB's assistance shall include these untapped resources in the recruitment plan. They can serve as a resource to help support relative children in foster care and possibly other children with transportation to school, doctor appointments, visitations, emergency respite and other county events so they become more familiar with our system.

Goal 3 Action Steps, Responsible Persons and Time Frame

FAB Responsibilities

- FAB's Foster Care Program Specialist will assist COMs in identifying internal and external team members that shall be comprised of various CYFD PS Staff, licensed foster parents, foster youth and other community stakeholders to serve on the county recruitment team.
- FAB's Foster Care Program Specialist will work with the COMs to ensure that the data needed to assess is available through ROM and Provider Dashboards.
 - This data will help each region determine their current resources, reach out to those active unlicensed providers to retain them and determine where they need to target their recruitment.

- FAB will work with PS Leadership and IT to research the use of Web-based application to assist with data tracking and targeted recruitment.
- FAB will be working with CYFD's IT Unit to ensure that all elements are represented as well as other features to maximize each regions targeted recruitment plan.
- FAB's Foster Care Program Specialist will review and provide technical assistance to CBRT the county based readiness self-assessment tool that helps analyze their data.
- FAB's Foster Care Program Specialist will train and help each CBRT how to utilize the already developed targeted RR planning worksheets.
- FAB will develop a monthly report for CBRT's so they are able to update and ask FAB's Foster Care Program Specialist for assistance with their RR plans.
- Navigators will participate and provide input when attending each CBRT's meetings.
- FAB's Foster Care Program Specialist will require each CBRT to provide a completed and measurable targeted recruitment plan once Goal 1 is accomplished.
- FAB's Foster Care Program Specialist will review each counties targeted RR plan to ensure all ten worksheets have been completed.
- FAB's Foster Care Program Specialist will ensure each counties targeted RR plan addresses the recruitment of new families, retention of current families, response and retention of prospective families from inquiry through licensure.
- FAB will provide foster parent specific Partners in Service training to placement staff utilizing the curriculum developed by the Diligent Recruitment Grant.
- FAB will request RAD to provide them a quarterly report that confirms that each county is increasing the number of foster parent homes.
- FAB will develop an exit interview practice that will on a monthly basis reach out to families who have withdrawn prior to licensure completion to see why they withdrew.
- FAB's Foster Care Program Specialist will work with counties to creatively utilize family members that were not able to complete licensure to help support relative children in foster care.
- FAB will help develop a screening and referral process for those individuals that express during recruitment that they are only interested in Adoption.

County Based Recruitment Team (CBRT) Responsibilities

- CBRT shall meet monthly and more often if necessary to complete and finalize a targeted RR plan.
- CBRT will utilize the RAD Bureau, ROM and My Providers Dashboards to extract data needed to develop and fill out the targeted RR plan worksheets and update completed RR plans.
- Each CBRT shall ensure they address the recruitment of new families, retention of current families, response and retention of prospective families from inquiry through licensure.
- CBRT shall provide FAB's Foster Care Program Specialist with their finalized RR plan.
- CBRT tracks what is working and not working with RR plans and works with team to make necessary adjustments to the plan.

- CBRT ensures the plan is a living, breathing document and reviews with all staff on a quarterly basis.
- CBRT shall report to FAB's Foster Care Program Specialist on a quarterly basis of any updates to RR Plans and needed technical support based on data collected of what is working and not working.
- CBRT shall review and revise their RR plans every 6 months.
- CBRT shall designate a team member to train county office staff on the County RR Plan.
- When a foster parenting inquiry is obtained by any CBRT member through targeted recruitment efforts the family's contact information shall be shared with the local navigator for follow up and data tracking purposes.
- CBRT will include in the recruitment plans creative ways to recruit family members that are unsure, and licensed homes that have not had a placement for a period of time to become additional resources to children in foster care.

Placement Staff Responsibilities

- Placement Supervisors shall be on the CBRT.
- Placement staff will implement the RR plan and provide CBRT feedback of how the plan is working and areas needing improvement.
- Placement staff will implement the RR plan and utilize the placement dashboard to identify families who are in an "active unlicensed provider" status (Adoptive Home) and to recruit them into becoming a licensed foster home.
- Placement Staff will, on a monthly basis, provide FAB's Foster Care Program Specialist with a list of families that have withdrawn.

RAD Staff Responsibilities

- The RAD Bureau will provide data analysis on the demographics, ethnicities, need level of children in care for each CBRT as needed.
- The RAD Bureau will on a monthly basis via KEVIN provide to FAB, Placement Staff and CBRT data that shows if the number of licensed foster family homes are increasing.
- RAD and FAB's Foster Care Program Specialist will meet quarterly with RMs and COMs to review the RR plan, discuss needs and adjustments needed to the plans as warranted.
- RAD will examine the use of Web-based application to ensure data quality is accurate.

Goal 4: Retention of Current Licensed Homes

Counties will retain 80% of currently licensed homes. See Appendix A for baseline goals by County.

The FAB's Foster Care Program Specialist will work with each Regions CBRT to provide technical assistance, support, and facilitation and monitor each counties retention plan. The FAB's Foster Care Program Specialist will ensure that each counties RR plan includes strategies that will aim to keep those families already licensed, thus reducing the attrition rate.

CFYFD's IT Unit has recently launched in each CYFD Region a web based dashboard that that extracts data entered into FACTS and helps PSD Workers from RMs, COMs, Placement Supervisors and PWs see their current "Providers." The Dashboard is able to filter the available providers by worker, team and region. The Providers Dashboard includes and breaks down provider data into the following tables:

1. Application Pending Providers
2. Active Licensed Providers
 - a. Capacity of placement per provider
 - b. # of placements per provider
 - c. Includes the various characteristics such as gender, sibling group, child specific age etc.
3. Active Unlicensed Providers (Adoptive Homes) can be used for recruitment.

This data will help each region determine their current resources to help them retain them. The FAB's Foster Care Program Specialist will be working with CYFD's IT Unit to ensure that all elements are represented as well as other features to maximize each regions targeted recruitment plan.

Goal 4 Action Steps, Responsible Persons and Time Frame

FAB Staff Responsibilities

- FAB's Foster Care Program Specialist will assist COMs in identifying internal and external team members that shall be comprised of various CYFD PS Staff, licensed foster parents, foster youth and other community stakeholders to serve on the county recruitment team.
- FAB's Foster Care Program Specialist will work with the COMs to ensure that the data needed to assess is available through ROM and Provider Dashboards.
- FAB will work with PS Leadership and IT to research the use of Web-based application, foster care software that will assist in tracking inquiries, online applications, application approvals, other required paper work and status of licensure, so that placement staff spend more time with families rather than paperwork.
- FAB will be working with CYFD's IT Unit to ensure that all elements are represented as well as other features to maximize each regions RR plan.
- FAB's Foster Care Program Specialist will review and provide technical assistance to CBRT the county based readiness self-assessment tool that helps analyze their data.
- FAB's Foster Care Program Specialist will train and help each CBRT how to utilize the already developed RR planning worksheets.
- FAB will develop a monthly report for CBRT's so they are able to update and ask FAB's Foster Care Program Specialist for assistance with their RR plans.
- Navigators will participate and provide input when attending each CBRT meetings.

- FAB's Foster Care Program Specialist will require each CBRT to provide a completed and measurable targeted RR Plan once Goal 1 is accomplished.
- FAB's Foster Care Program Specialist will review each counties RR plan to ensure all ten worksheets have been completed.
- FAB's Foster Care Program Specialist will ensure each counties RR plan addresses the recruitment of new families, retention of current families, response and retention of prospective families from inquiry through licensure.
- FAB will provide foster parent specific Partners in Service training to placement staff utilizing the curriculum developed by the Diligent Recruitment Grant.
- FAB will request RAD to provide them a quarterly report that confirms that each county is retaining their foster parent homes.
- FAB will work with RAD to gather and evaluate attrition rates by county.
- FAB will work with COMs to ensure that data needed to assess retention is available through RAD, Placement Dashboards and examine the use of Web-based application for this function.
- FAB's Foster Care Program Specialist will work with RAD to develop a foster parent satisfaction survey, send surveys out to foster parents statewide and analyze the data.
- FAB will collaborate with COMs to conduct exit interviews with foster parents who leave the agency.
- FAB's Foster Care Program Specialist will work with counties to creatively utilize licensed homes that have not had a placement for a period of time to become additional resources to children in foster care.

CBRT Responsibilities

- CBRT shall meet monthly and more often if necessary to complete and finalize a targeted RR plan.
- Each CBRT shall ensure they address the retention of current families, response and retention of prospective families from inquiry through licensure.
- CBRT shall provide FAB's Foster Care Program Specialist with their finalized RR plan.
- CBRT tracks what is working and not working with RR plans and works with team to make necessary adjustments to the plan.
- CBRT ensures the plan is a living, breathing document and reviews with all staff on a quarterly basis.
- CBRT shall report to FAB's Foster Care Program Specialist on a quarterly basis of any updates to RR Plans and needed technical support based on data collected of what is working and not working.
- CBRT shall review and revise their RR plans every 6 months.
- CBRT shall designate a team member to train county office staff on the County RR plan.
- CBRT will include in the retention plan creative ways to retain and utilize licensed homes that have not had a placement for a period of time to become additional resources to children in foster care.

Placement Staff Responsibilities

- Placement Supervisors shall be on the CBRT.
- Placement staff will implement the RR plan and provide CBRT feedback of how the plan is working and areas needing improvement.
- Placement staff will utilize the Placement Dashboard to contact and provide support to licensed providers on a monthly basis.
- Placement Staff will on a monthly basis provide FAB's Foster Care Program Specialist with a list of families that have withdrawn.
- COMs, shall implement a client support component to be addressed at every staff meeting
- COMs will provide a monthly report to FAB that details the discussion addressed at all staff meetings surrounding the topic of client support and retention of current foster parents.
- COMs will hold quarterly foster parent meetings to address foster parent concerns, request feedback from foster parents and identify what would be helpful in supporting them.
- COMs will monitor foster parent complaints and work to identify trends to address with staff in effort to improve client support to foster parents
- COM will provide timely response to all foster parent complaints in effort to resolve any issues.
- COMs and Placement Supervisors will monitor licensed foster homes through the use of the Team Provider Dashboard every 30 days and provide feedback during supervision.
- Placement staff will return licensed foster parent phone calls and requests within 1 business day.
- Placement staff will be instrumental in supporting foster parents by making referrals to both Project Revive and Fiesta to assist foster parents with support, parenting techniques and grief and loss issues.
- Placement Staff shall through the RR plan contact licensed homes that have not had a placement for a period of time to become additional resources to children in foster care.

RAD Staff Responsibilities

- RAD will collaborate with FAB's Foster Care Program Specialist to develop a foster parent satisfaction survey.
- RAD will extract foster parent satisfaction survey data by region and provide results to FAB, RMs, COMs and PS Leadership.

Investigation Staff Responsibilities

- Investigation staff shall participate in Partners in Service training
- Investigators will be responsive in providing necessary information and documentation to the foster parent upon initial placement of children.
- Investigators will provide on call and SCI phone numbers to foster parent.
- Investigators will keep foster family informed as to case status.

- Investigators will provide foster parents accurate and helpful information on the children placed with them.
- Investigators shall support foster parent by addressing any concerns or questions about child placement.
- Investigators will inform foster parents of case transfer dates, provide new worker information and ensure foster parent has all necessary documentation prior to case transfer.

Permanency Planning Staff Responsibilities

- Permanency workers shall participate in Partners in Service training.
- Permanency workers will make immediate contact with foster parent upon case assignment.
- PPWs will be responsive in providing necessary information and documentation to the foster parent upon initial placement of children.
- PPWs will provide on call and SCI phone numbers to foster parent as needed.
- Permanency workers will keep foster family informed as to case status and include as part of the child's team.
- Permanency workers will provide timeliness in returning phone calls and responding to requests from foster parents.
- Permanency workers will be transparent and provide foster parents accurate and helpful information on the children placed with them.
- Permanency workers shall support foster parents by addressing any concerns or questions about child placement.

Administrative Staff Responsibilities

- Administrative staff shall participate in Partners in Service training
- Administrative staff will triage phone calls within the placement unit or designee to ensure families receive timely responses.

Client Service Aide (CSA) Responsibilities

- CSA staff shall participate in Partners in Service training.
- CSA staff will immediately report any foster parent complaints to COM and Placement Supervisors.
- CSA staff will keep foster parents informed on any issues children experienced during transport or visitation.

Goal 5: Train CYFD Placement Staff to help support Foster Parents

The FAB will coordinate and provide training to new and current CYFD Placement Staff with their roles and responsibilities as a placement worker and the policies and procedures they shall follow.

The Placement Training will embrace a “Back to Basics” culture and contain the following training modules:

- Placement Workers roles and responsibilities
- COM & Placement Supervisor roles and responsibilities
- FACTS data entry
- Criminal Records Checks
- Guardianship Assistance Program (GAP) Eligibility
- Adoption and Guardianship Subsidy Negotiations
- ICPC
- ICAMA
- Partners in Service training internal & external
- Licensing Regulations
- SAFE(Structured Analysis Family Evaluation)
- Resources and Training for prospective and current licensed foster parents

These various training topics will be provided to placement staff through individual modules and as needed throughout the year. SAFE training will be conducted by the Consortium for Children under contract utilizing Title IV-E funds.

Goal 5 Action Steps, Responsible Persons and Time Frame

FAB Responsibilities

- The FAB will partner with the CYFD’s Academy of Professional Development and Training (ADPT) in conjunction with the PS Training Director and Regional Trainers to develop a training plan to include Placement training.
- FAB will conduct Training for Trainers to Regional Trainers as they are hired so that they become proficient in Placement training modules and are able to train their Regional Placement Staff as needed.
- Placement training will be offered to existing COMs, Placement Supervisors and PWs semiannually.
- FAB will provide Placement training to new COMs, Placement Supervisors and PWs.
- FAB will communicate with RMs and COMs on a quarterly basis to offer training that may be needed.

APDT Responsibilities

- The APDT will partner with FAB, PS Training Director and Regional Trainers to develop a training plan to include Placement training.
- Research and implement E-learning modules for Placement Staff to access training as needed.

Health Care Oversight and Coordination Plan

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

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

MCO's rely on certain events and/or data to trigger a review of an individual's health status and needs. These triggers include events such as:

- 1) abuse or neglect reports involving the individual;
- 2) new diagnosis with significant health or safety impact;
- 3) new diagnosis involving behavioral health or substance abuse;
- 4) hospitalization;
- 5) request by provider or family member; and
- 6) any other indication that the individual may need to move to a new risk group.

In addition to the triggers above, plans have software that enable the care management staff to access patient records in real time and on demand from all providers in the system. When a trigger event occurs for an individual, the MCO assigns a care coordinator to complete a comprehensive assessment for low and medium risk individuals or notifies the assigned care coordinator to update the assessment for an individual who is already receiving complex case management.

In SFY2020, CYFD Behavioral Health Services (BHS), collaborated with the Human Services Department (HSD) Medicaid Assistance Division (MAD) to revise language in the MCO contracts in order to better support children, youth and families involved with CYFD. In partnership with MAD, CYFD BHS was successful in proposing language that will support increased training on CYFD specific topics for MCO staff, increased prioritization and service access, increase focus on transition in levels of care to reduce precipitous discharge and increased coordination, reestablish a no reject/no eject expectation, and increase communication and partnership with CYFD staff.

PSD has an ongoing collaboration with the MCOs and provider agencies in regards to psychotropic medication oversight. In 2014, PSD partnered with the MCO's to develop a procedure for PSD to monitor psychotropic and other prescription medications more effectively.

This procedure was created in order to ensure children under PSD care are not inappropriately diagnosed or placed in settings as a result of a misdiagnosis. The procedure was fully developed and implemented on September 29th, 2015 and updated on March 15th, 2016, within the Permanency Planning Procedures (*see paragraph 7 of PR 8.10.8.17—Medical and Behavioral Health*). This procedure requires all prescriptions of psychotropic medications or any other prescription medications be prescribed by a professional provider who has a license to prescribe medications. The PSD worker must request the prescribing provider to conduct a comprehensive evaluation prior to recommending any prescription and explain the need for the medication related to the child's diagnosis. The PSD worker must request the prescribing provider to discuss the potential side effects, as well as risks and benefits of taking the medication. PSD and the child's parent/guardian reserves the right to question the prescription and obtain a second opinion from another provider. The decision to consent to the medication is made by the PSD worker in consultation with their supervisor and the child's parent/guardian. When the medication has been prescribed and administered to the child or youth, the PSD worker is responsible for regularly assessing the impact of the medication on the child. The PSD worker participates at least quarterly in medication management meetings with the treatment team. The PSD worker tracks the psychotropic medication through the case management system (FACTS). The reports are monitored and reviewed by the Research, Assessment and Data (RAD) Bureau. The information is shared with field staff to monitor well-being for children in care. On-going training is provided to PSD staff as well, to continue to ensure children are not misdiagnosed and have the proper and safe oversight.

PSD utilized a psychotropic medication workgroup that includes PSD staff, medical providers, youth and foster parents to assist in developing these procedures. PSD participates in a statewide Medication Monitoring committee that has developed a complex case consultation. PSD workers are able to staff cases with psychiatrists who volunteer their time to review casework, best practice and medication. The committee is in the process of coordinating a summit. The goal of the summit will be to provide education to psychiatrists in the state regarding medication and best practice for prescribing medications with the foster care population.

CYFD foster children are also required to obtain an Early and Periodic Screening, Diagnostic and Treatment Services (EPSDT) within 30 days of being in PSD custody. This requirement also has been developed into PSD's Permanency Planning procedure (*see paragraph 5 of PR 8.10.8.17—Medical and Behavioral Health*). The procedure was first developed on December 31st, 1997, and has since been updated on March 15th, 2016. The PSD worker receives recommendations from the physician who completes the EPSDT and provides follow up. The PSD worker enters in all the information from the EPSDT into the case management system (FACTS). This allows for PSD to track and monitor their medical profile. Centennial Care also requires that all Medicaid members have a high risk assessment completed within 30 days of membership. The high risk assessment determines the need for a comprehensive needs assessment. This assessment primarily screens for physical health. The level of care coordination by the designated MCO is determined upon completion of this assessment. The care coordinators are responsible for following up on identified needs in the comprehensive assessment. The MCOs Care Coordination process assess

and coordinates physical and behavioral health for children. They are responsible for ensuring services have been provided. PSD has also worked with Department of Health (DOH) to be able to access DOH immunization records for children in foster care and are able to import those records into the foster care record. PSD is responsible for obtaining, monitoring and maintaining immunization records for all children in PSD care. This is outlined in PSD's Permanency Planning Procedures (*see paragraph 5 of 8.10.8.17—Medical and Behavioral Health*).

PSD has developed an agreement with the Human Services Department to allow young adults to receive health insurance until the age of 26. More information on this can be found in the John H. Chafee section of the 2020-2024 report.

PSD retains the services of a forensic pediatrician, Dr. Karen Campbell, as Medical Director. The Medical Director provides training on the detection of abuse and neglect and the impact of severe abuse on the child victim. She is available to PSD staff for consultations related to meeting the on-going physical needs of children and to assist with identification of specialists, as needed. Dr. Campbell also reviews medical records and reports to ensure the findings and results of investigations are appropriate given the medical evidence of abuse that can be reasonably presented to a judge for adjudication of abuse and neglect.

PSD has also developed a consultation process for staff to have access to voluntary psychiatrists for review, support and recommendations related to complex cases. This process is outlined in PSD's Permanency Planning Procedures created and implemented on March 15th, 2016 (*see paragraph 6 of 8.10.8.17—Medical and Behavioral Health*).

PSD has access to physicians and other medical professionals to consult with PSD both in terms of individual children and in terms of changes needed in the overall service system. There are clinics in Albuquerque that provide comprehensive services to foster children and youth. At the stage of an abuse or neglect investigation, the Child Abuse Response Team (CART) provides psychological evaluations and comprehensive physical exams, including dental. CART is at the University Hospital and can be used by other counties if the youth is sent to Albuquerque. Dental services are limited in the state, but there are traveling dental clinics for any resident of New Mexico in Chaves, Doña Ana, and Santa Fe Counties. Routine health care is accessible statewide, but for certain specific needs, individuals have to travel to Albuquerque for specialists.

Telemedicine care is being provided in some counties to assist in providing more timely care services to individuals who live in rural areas. Lack of services in rural areas continues to be a limitation in the State of New Mexico, however, initiatives and collaborations between state agencies are taking place to target specific rural areas to increase access to important services. PSD remains involved with the Behavioral Health Purchasing Collaborative (BHPC). PSD and Managed Care Organizations (MCO's) have implemented a process to provide for timely behavioral health assessments for children when they first enter foster care. Assessment results are used to ensure the timely provision of services and to enhance placement stability. PSD Placement Services Procedures requires (*see 8.26.2—Placement Services*):

- A designated licensed physician and dentist for each child, so a coordinated plan of care is assured.

- Foster parents must obtain medical attention for any sick or injured child. Foster parents, in their role as an adjunct representative of state government, shall not rely solely on spiritual or religious healing for children.
- Foster parents shall maintain copies of all educational and medical documents related to the foster child in a traveling medical and educational file that shall remain with the child if the child is moved.
- The Permanency Planning Worker (PPW) ensures the foster care provider is obtaining medical attention for any sick or injured child and that the family is meeting the child's ongoing health care needs such as well child checks.

PSD youth services procedures (8.10.9 NMAC) comply with provisions of P.L. 111-148, the Patient Protection and Affordable Care Act. This Act requires states to provide information about the importance of designating another individual to make health care treatment decisions on behalf of the child if the child becomes unable to participate in such decisions and the child does not have, or does not want, a relative who would otherwise be authorized under State law to make such decisions. It also provides the child with the option to execute a health care power of attorney, health care proxy or other similar document recognized under State law. In addition to the amendments to procedures, PSD has provided training on the new requirement to our youth transition specialists.

In 2020-2024, PSD will continue to implement the Child and Adolescent Needs and Strengths (CANS) trauma informed version. The CANS training has been rolled out statewide, and all Permanency Planning Workers will complete the CANS training by July 1, 2020. Each child in custody continues to be assessed prior to their court hearings. Praed is the company that will maintain the Portal for CYFD to utilize for the CANS.

CYFD BHS trained 243 CYFD staff in the Child and Adolescent Needs and Strengths (CANS) tool in FY 2018. Over 800 baseline CANS and 140 follow-up CANS were administered. CYFD is beginning to see progress on identified youth needs and on reported youth strengths using the CANS. CYFD provided data through aggregate reports and average ACES scores per county to advocate for services for youth in rural counties. CBHCs began using the CANS in March 2018 and PSD staff began using CANS on July 1, 2018.

CYFD-BHS understands the benefit of using the CANS uniformly across the state. It creates a common language to be used by all system partners as well as an evidence based evaluation tool to aid in making decisions for behavioral care. Towards the end of expanding the use of the CANS, CYFD-BHS has trained its HTEP and SOC III grant recipients to administer the CANS to those enrolled in their respective programs. They will start using the CANS by the end of Q4 of the current fiscal year.

CYFD BHS and NMSU will be hosting a train the trainer for Protective Services and CYFD BHS staff to become CANS trainers in June of 2020. CYFD BHS's Healthy Transitions grant providers, BMS pilot providers and other key stakeholders will be trained to be trainers in the CANS in July of 2020.

All youth in PS custody will have a CANS completed by June 2021, CYFD BHS is also continuing to develop a Crisis Assessment Tool (CAT) policy and procedure so that every youth who comes into PS custody will have a CAT completed by a clinician when they come into custody to ensure youth safety needs are addressed.

PSD continues to hold case consultations with caseworkers whose clients are in TFC or RTC, as well as any child the case worker has concerns about. Caseworkers have been provided with a list of questions they may ask the prescriber to ensure due diligence in justifying the need for the medication, and understand why the medication is being prescribed. In addition, PSD workers are required to have 90 Day Case Consultations to ensure the well-being of the family and the child in care. This process is outlined in Permanency Planning Procedures (*see 8.10.8.13—Case Planning*). These consultations bring all providers, family members, foster care providers and other case participants to the table to ensure compliance with the case plan and also to ensure all needs of the family are being met. These consultations may be more frequent than 90 days, depending on the complexity of the case or the level of needs of the family.

PSD continues to monitor psychotropic medications. PSD will be working with the National Center for Youth Law on ensuring foster youth are only prescribed psychotropic medication when in their best interest project. This is part of a portfolio of projects that Patient-Centered Outcomes Research Institute (PCORI) has funded to help develop a community of patients and other stakeholders equipped to participate as partners to disseminate PCORI-funded study results related to the use of psychotropic medication use with children and youth. Through the Engagement Award Program, PCORI is creating an expansive network of individuals, communities and organizations interested in and able to participate in, share, and use patient-centered clinical effectiveness research. Please see above paragraph with Managed Care Coordination on specific procedures outlining the psychotropic medication oversight. According to Jean Slutsky, PCORI's Chief Engagement and Dissemination Officer, "This project was selected for Engagement Award funding because it will involve stakeholders in actively disseminating PCORI-funded research results to those who can use this information to inform healthcare decisions."

In SFY 20, CYFD PS and BHS partnered to establish a contract with a psychiatrist to consult with CYFD management regarding creation and implementation of new policies and/or procedures to improve practices in New Mexico relating to monitoring medication usage for children and youth and to provide case consultation on specific cases of medication management. Specifically, this contractor provides consultation on the Psychotropic Committee process and make recommendations for improvement, as appropriate. The contractor also provides consultation activities, to include case review and meetings with Juvenile Justice, Protective Services and Behavioral Health Services (BHS) staff to develop the policies and procedures; assist CYFD in monitoring medication usage from report from Department of Health on pharmacy claims; and assist CYFD BHS Licensing and Certification Authority (LCA) within to conduct review of prescribing practices, policies, procedures as needed.

Recent studies and research reviews – including PCORI’s Evidence Update: Antipsychotics for Children with Hyperactivity or Disruptive Disorders; Comparative Effectiveness of State Psychotropic Oversight Systems for Children in Foster Care; and The Family Voice Study: A Randomized Trial of Family Navigator Services Versus Usual Care for Young Children Treated with Antipsychotic Medication – suggest variations in child welfare, judicial, and health policies have a significant impact on prescribing practices.

Examples of promising policies include:

- Increasing the use of public health nurses to monitor medication;
- Training and supporting stakeholders to advocate for adoption and health care quality improvement based on nationally accepted measures;
- Ensuring informed consent to medication for children in foster care that is vested with someone who does not have a conflict of interest.

This project will increase awareness of promising policies and practices identified by researchers and increase the capacity of youth in care, line-level stakeholders, and policymakers to improve state policy and practice. PSD has already incorporated the informed consent into procedures (*see paragraph 7 of 8.10.8.17—Medical and Behavioral Health*).

CYFD has continued to actively implement the various components of the state’s Health Care Oversight and Coordination Plan. In an effort to better support New Mexico’s children, youth and families who are involved with CYFD, BHS collaborated with the NM Human Services Department’s Medical Assistance Division (MAD) this past year to revise language in the Managed Care Organizations contracts. Included in the proposed language is increased training on CYFD specific topics to MCO staff, increased focus on transition in the levels of care in order to reduce precipitous discharge and increased coordination, increased prioritization and service access, reestablishing a no reject/no eject expectation and increased partnering and communication with CYFD staff.

In order to improve the assessment and provision of appropriate supports and services, PSD has worked with BHS to continue the implementation of the Child and Adolescent Needs and Strengths (CANS) assessment. PSD field staff have been provided with CANS training opportunities throughout the year as part of the statewide roll out. Most recently, training sessions delivered remotely by the Praed Foundation was offered to PSD and BHS staff as well as BHS providers in order to ensure all Permanency Planning staff are trained by July 1, 2020. In an effort to increase internal support and capacity, two sessions of the CANS Training for Trainers will be completed by the end of June 2020 by staff from PSD, BHS and the CYFD Employee Training Division. The expectation will be for those who complete the Training for Trainers to support staff throughout the state in using the CANS as well as training staff in the CANS.

CYFD PSD and BHS have also worked together to execute a contract with Justin White of New Vision Behavioral Health which will assist the department with monitoring and decreasing the use of medication with children and youth who are receiving services and/or are in the custody of CYFD. He will provide consultation services to CYFD with the goal of improving medication

management policies and procedures as well as provide case consultation to CYFD on specific cases specifically regarding medication management related matters. This will be accomplished through the following activities:

1. Consultation on the Psychotropic Committee process and make recommendations for improvement, as appropriate.
2. Consultation regarding PS medication management including making recommendations to the staff about medication prescribing best practices.
3. Assist CYFD management and staff in reviewing reports related to medication for children in PS custody.
4. Consult with CYFD management regarding the creation and implementation of new policies and/or procedures to improve practices relating to monitoring medication use for children and youth to include but is not limited to: case review and meetings with Juvenile Justice, Protective Services and Behavioral Health Services (BHS) staff to develop the policies and procedures.
5. Assist CYFD in monitoring medication use from reports obtained from the NM Department of Health on pharmacy claims.
6. Assist CYFD BHS Licensing and Certification Authority (LCA) within to conduct review of prescribing practices, policies, procedures as needed.

Disaster Plan

PSD provides child protective services and other child welfare services in every geographic area in the state. Administration of the child welfare program is centralized, with direct services offered through county offices located within five designated regions.

In the event of a wide-scale emergency, PSD is responsible for the children in its custody. PSD also plays a role in the protection of other children who may become separated from their caregivers due to the emergency. The federal government has recognized the importance of these responsibilities for child welfare agencies across the nation, as codified in the Child & Family Services Improvement Act of 2006. In response to this Act, and in acknowledgement of its responsibility to the children entrusted to its care, PSD has developed an All-Hazard Emergency Response Plan.

PSD began the development of the plan in 2014 through collaboration with the Department of Health (DOH) to assist in developing a disaster plan specific to children in PSD custody. Since 2015, there has been development of mandatory staff trainings and the creation of individual county office plans; however, planning committees dropped off in 2016. While, New Mexico does not experience many natural disasters, this year there was a pandemic which greatly affected New Mexico.

In response to this pandemic, in February of 2020, CYFD developed an all hazard “Disaster Response and Recovery Plan - Continuity of Operation for Child Welfare” in response to the growing concerns of a potential COVID-19 pandemic. The updated plan included CYFD’s

“Protective Services All-Hazard Emergency Response Plan” along with other essential functions from CYFD’s departments.

Given the unprecedented nature of COVID-19 many of CYFD’s initial planning assumptions had to be adjusted. For example, social distancing, isolation, quarantine, testing and rationing of PPE, etc., had to be integrated into the agency’s departments, programs and services.

CYFD sought guidance and worked in lockstep with the New Mexico Department of Health, Governor’s Office and other agencies in developing these new plans, protocols and best practice. Some of the practices include extending visitations between youth and families via phone and encrypted video conferencing and upgrading technologies to allow staff to access case files from home via telework. A COVID-19 public outreach campaign was also initiated which included sharing important information on prevention tips and resources specific to children and youth. Information was also provided to the public on impacts on CYFD services such as juvenile justice services and child protective services. Resources and information were also created and shared related to child care, food assistance, and behavioral health supports.

Like the country as a whole CYFD’s future emergency planning will need to adjust and accommodate to the new challenges COVID-19 poses. However, COVID-19 has also provided the agency with new opportunities and frameworks to engage and provided services to children and families.

For specifics on the plan, please see attachment labeled New Mexico CYFD PS 2019 Disaster Plan.

Federal Requirement	Corresponding Page # in NM Disaster Plan
Identify, locate, and continue availability of services for children under state care or supervision who are displaced or adversely affected by a disaster.	Pages 8 – 20, Annex A
Respond, as appropriate, to new child welfare cases in areas adversely affected by a disaster, and provide services in those cases.	Pages 8 – 20, Annex A
Remain in communication with caseworkers and other essential child welfare personnel who are displaced because of a disaster	Pages 8 – 20, Annex A
Preserve essential program records	Pages 8 – 20, Annex B
Coordinate services and share information with other states.	Page 15

Training Plan

Updates to Training Plan

At the direction of Children, Youth and Families Department (CYFD) Secretary, an expert trainer from the community and within his staff is currently looking at the structure of the Training Academy and Protective Services Training and Coaching to determine the best model to have consistency, structure and to meet the training needs across divisions. Recommendations will be delivered to the Secretary for consideration and implementation. The department anticipates adopting that plan in the second half of calendar year 2019.

The following is a summary of the staff development and training plan currently in use: PSD operates a training and staff development program that supports the goals and objectives of the Child and Family Service Plan (CFSP). Children, Youth and Families Department Foundations of Practice (FOP) training and PSD's advanced trainings are designed to support safety, permanency, and well-being for children, as well as PSD's CFSP Plan for Improvement goals. PSD has worked with the Academy for Professional Development and Training to include the Piñon Practice Model, Adaptive Leadership™, and Continuous Quality Improvement (CQI) into the FOP curriculum.

Each of these trainings is supported through a combination of state general funds and federal Title IV-E, Title IV-B Part 2, Chafee, CAPTA and other funds. Non-IV-E funds (e.g., Title IV-B Part 2 and CAPTA), although limited, provide important support for training for contract service providers, as well as staff training on topics not eligible for IV-E reimbursement.

Trainings are provided by Academy for Professional Development and Training, Protective Service Employees, Juvenile Justice Employees, and New Mexico State University Family and Child Welfare Training Project Employees. A cross division Training Advisory Council (TAC) continues to assist in development of staff trainings.

In order to prepare an employee to perform job duties, an employee is taught child welfare concepts, which include, but are not limited to:

- Trauma informed - A trauma informed component which assists the employee in addressing trauma experienced by the child, birth family or legal guardian, the foster parents and with themselves.
- Child maltreatment - An employee will obtain knowledge in identification of child maltreatment and gain skills in assessing safety threats to the child and identifying parental protective capacities.
- Worker bias - An employee will become aware of their personal biases and how those biases may impact their decision making in working with children and families. Recognizing biases assists an employee to be self-aware and may better prepare an employee for their work in child welfare which may help with retention of employees.

- Communication/Interview skills - An employee learns to communicate with children, parents, guardians, foster parents and other partners in child welfare to effectively assist in achieving safety, permanency and well-being for children and families.
- Cultural Humility-taken from Melanie Tervalon's theory on culture. There is focus on engagement in a way that raises curiosity of the worker. Employees will learn how to self-reflect their own biases and values, and understanding the role this plays in decision making.

Title IV-E funded training provided to PSD staff include:

- Social Work Stipend Program: Through Agreements with the four Universities offering Social Work programs in the state (New Mexico Highlands University, New Mexico State University, Western New Mexico University, and Eastern New Mexico University), stipends were offered to BSW or MSW students in exchange for coming to work for PSD upon graduation.
- New Employee Training: Sessions are provided each month for 10 to 12 sessions per year. The training is completed in a five-week time frame, of which two weeks are on the job training (OJT) activities.
- Annual Court Improvement Project Cross-Training: These annual events are funded largely through the Court Improvement Project's cross-training grant, with some logistical support provided by SWIFCA through IV-E.
- Annual Foster Parent Conference and Recertification Training.
- "Working with Youth": A six-hour training that includes information on positive youth development, adolescent brain development, youth engagement, talking with youth about sex, and youth safety issues.
- Special Topics in Adoption: Trainings are provided to CYFD staff and foster and adoptive families to assist in their knowledge in adoptions.
- SAFE Training: SAFE training is ongoing throughout the year, provided by PSD staff certified to train SAFE.
- Safety Organized Practice (SOP) has been provided to all Supervisors and front line staff. Coaching has also been provided by NCCD and Casey to implement the CAP Framework and assist in getting the practice moving forward. A T4T was conducted to 22 staff, and they have trained the Intro to SOP to staff regionally.
- Cornerstone (Learning Management System) has been updated to include PS trainings. The system allows staff to register for trainings, offers CEUs, evaluation questions, as well as monitors and tracks staff participation.
- All PS staff are trained in Youth Sex Trafficking. A curriculum was developed with the assistance of Behavioral Health and the PSD Training Director to include an e-learning component and a 3 hour face to face, regionally based training.
- PSD FACTS staff provide statewide training whenever the FACTS system undergoes a major revision. FACTS staff follow up throughout the year with county and regional "booster" training on complex topics relating both to annual and mini releases. PowerPoint trainings for the various aspects of the annual releases are made available to staff via the CYFD Intranet. Initial FACTS training is provided through e-learning during foundations of practice.

- Other training for PSD staff is provided through Academy for Professional Development and Training in areas such as defensive driving, HIPAA, general supervisory skills, respect in the workplace, ethics, domestic violence and other topics.

PSD staff provide informal training and technical assistance regularly to staff in the field when the need arises. For example, the Interstate Compact on the Placement of Children (ICPC) coordinator often provides training on changes in ICPC procedures; youth services staff provide training on emerging issues related to youth, etc.

Training Provided Through Programs Included in the 2020-24 CFSP

Coaching:

In order to achieve positive outcomes for our children and families, there is the need for skill based, hands on learning in the field for both workers and supervisors. The goal is for trainer coaches to be intentional, strategic and meaningful in daily interaction and work with workers, supervisors and management to improve outcomes whether technical or adaptive. Beyond the work with new employees, a focus on Supervisors and coaching them in a way that role models and build skills of supervisors to utilize with their staff.

Six Regional Trainer/Coaches (RBTC) provide training support, coaching, and monitoring learning. They are responsible for ensuring that each employee in their region receives training that is position-specific, competency-based, and track-based. Each new PS employee has an individualized training plan developed and monitored by the RBTC. The RBTC ensures that each worker completes initial training as well as ongoing required trainings, in addition to any supplemental trainings that the worker or supervisor chooses to be added to the worker's training plan. The RTBC is also responsible for coordination and facilitation of field staff trainings as identified through the Quality Assurance Loop Around process and desktop reports. The RBTC acts as a coaching support to staff, and does hands-on skill building with staff.

Cost Allocation Plan:

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

Section F. Statistical and Supporting Information

1. CAPTA Annual State Data Report Items:

Information on Child Protective Service Workforce

Staff Qualifications

PSD staff must meet minimum qualifications, as determined by their positions and job functions. If a social work license is required for a position, the employee will meet the necessary requirements to maintain that licensure. Qualifications for each position are as follows:

- Statewide Central Intake (SCI) Worker: Bachelor's Degree in Social Work, Education, Counseling, Psychology, Sociology, Criminal Justice or Family Services/Studies from an accredited college/university. Experience is not required for these positions.
- SCI Senior Worker: Bachelor's Degree in Social Work, Education, Counseling, Psychology, Sociology, Criminal Justice or Family Services/Studies from an accredited college/university and two years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care.
- SCI Supervisor: Bachelor's Degree in Social Work from an accredited college/university, four (4) years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care, and licensure by the NM Board of Social Work Examiners at the LBSW, LMSW, or LISW level or eligibility for such licensure in accordance with NM requirements OR Bachelor's Degree in Social Work, Education, Counseling, Psychology, Sociology, Criminal Justice or Family Services from an accredited college/university and six (6) years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care.
- Investigation Case Worker: Bachelor's Degree in Social Work, Education, Counseling, Psychology, Sociology, Criminal Justice or Family Services from an accredited college/university and two (2) years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care.
- Investigation Senior Worker: Bachelor's Degree in Social Work, Education, Counseling, Psychology, Sociology, Criminal Justice or Family Services from an accredited college/university and four (4) years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care.

- Investigation Supervisor: Bachelor's Degree in Social Work from an accredited college/university, four (4) years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care, and licensure by the NM Board of Social Work Examiners at the LBSW, LMSW, or LISW level or eligibility for such licensure in accordance with NM requirements OR Bachelor's Degree in Social Work, Education, Counseling, Psychology, Sociology, Criminal Justice or Family Services from an accredited college/university and six (6) years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care.
- In-Home Services Practitioner: Master's Degree in Social Work, Guidance and Counseling, Counseling, Psychology, Sociology or Criminology from an accredited college/university is required for this position and two years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care. Must possess a current license in New Mexico as a Doctoral Level Psychologist, Psychologist Associate, LISW, LMSW, LPC, and LPCC, LMHC or LMFT or eligibility for such licensure in accordance with New Mexico requirements.
- In-Home Services Practitioner Supervisor: Master's Degree in Social Work, Guidance and Counseling, Counseling, Psychology, Sociology or Criminology from an accredited college/university is required for this position and four years of any combination of experience including working with communities, working on health or social service related matters, social work/case management experience, behavioral health and/or health care. Must possess a current license in New Mexico as a Doctoral Level Psychologist, Psychologist Associate, LISW, LMSW, LPC, and LPCC, LMHC or LMFT or eligibility for such licensure in accordance with New Mexico requirements.

Ongoing Training and Staff Development

PSD staff are provided with ongoing training to enhance their skills and ensure they are abreast of best practices and ethical standards. Staff have access to over 70 trainings that are offered in-person and online. All of the trainings seek to increase knowledge of ethical and professional behavior, best practices, and effective evaluation of services. Coaching services are also available to staff to support them in the adoption of the following core competencies:

1. transfer of learning from training to practice;
2. implementation of evidence practices;
3. skill building;
4. problem solving and staying on track; and
5. and modeling behaviors

An overview of all current trainings is included in the 2020-24 CFSP.

Staff Demographics

PSD staff closely reflects the ethnic make-up of New Mexico's population. The demographic breakdown of PSD personnel is as follows:

Ethnicity	Percentage
African American	2.6%
American Indian	7.7%
Asian	0.5%
Hispanic	55.4%
Samoan	0.5%
White	26.9%

The gender make-up is as follows:

Gender	Percentage
Female	80.1%
Male	19.9%

Caseload Standards

CYFD uses the caseloads standards established by the Child Welfare League of America (CWLA):

- Intake Workers - 1-2 calls per hour
- Investigation- 10 new reports per month
- Permanency – 12-15 children at any given time
- Placement – 30-35 adoptive or foster families at any given time
- In Home Services - 8 cases at any given time.

CYFD Policy is that supervisors should not have more than 8 direct reports. For Field supervisors, CYFD's standard is 5-6 direct reports.

Caseload Reports current as of May 2019 are attached.

Juvenile Justice Transfers

New Mexico is a dual jurisdiction state so never transfers custody of dependents to the state juvenile justice system. The number of transfers is therefore 0.

New Mexico uses the term "crossover youth" to refer to those dependents with a concurrent adjudication that provides for supervision of the Juvenile Justice Services division. There are currently 37 such dependents in the state, all of whom are in out-of home placement.

2. Education and Training Vouchers

	Total ETVs Awarded	Number of New ETVs
2017-2018 School Year (July 1, 2017 to June 30, 2018)	40	19
2018-2019 School Year* (July 1, 2018 to June 30, 2019)	28	12

*Numbers as of June 05, 2019 – YSB is continuing to accept and process requests from youth for ETV

3. Inter-Country Adoptions

As detailed above, CYFD identified no children who entered state custody due to disruption or dissolution of an inter-country adoption.

4. Monthly Caseworker Visit Data

Documented Worker/Child Visits							
Summary by County: Through June 1, 2019 to MAY 31, 2020							
County	Region	# of children with documented monthly visits	# of children without visits documented	Total all children	Percentage of children with a documented visit	# of visits in child's residence	% of visits in child's residence
Bernalillo	Metro	9733	294	10027	97.07%	9473	97.33%
Chaves	SE	1224	51	1275	96.00%	1141	93.22%
Cibola	NW	453	3	456	99.34%	451	99.56%
Colfax/Union	NE	210	7	217	96.77%	207	98.57%
Curry	SE	940	40	980	95.92%	928	98.72%
Dona Ana	SW	1915	13	1928	99.33%	1899	99.16%
Eddy	SE	1000	30	1030	97.09%	967	96.70%
Grant/Catron	SW	276	3	279	98.92%	270	97.83%
Lea	SE	1072	364	1436	74.65%	1063	99.16%
Lincoln	SW	150	0	150	100.00%	146	97.33%
Luna/Hidalgo	SW	201	1	202	99.50%	198	98.51%
McKinley	NW	392	4	396	98.99%	388	98.98%
Otero	SW	728	35	763	95.41%	720	98.90%
Quay/DeBaca/Harding	SE	232	1	233	99.57%	232	100.00%
Rio Arriba/Los Alamos	NE	684	192	876	78.08%	644	94.15%
Roosevelt	SE	109	0	109	100.00%	107	98.17%
San Juan	NW	1063	4	1067	99.63%	1050	98.78%
San Miguel/Guadalupe/Mora	NE	809	64	873	92.67%	760	93.94%
Sandoval	NW	432	18	450	96.00%	416	96.30%
Santa Fe	NE	950	24	974	97.54%	926	97.47%
Sierra	SW	37	0	37	100.00%	37	100.00%
Socorro	SW	158	1	159	99.37%	157	99.37%
Taos	NE	465	12	477	97.48%	451	96.99%
Torrance	NW	286	4	290	98.62%	278	97.20%
Valencia	NW	1147	8	1155	99.31%	1122	97.82%
Unknown (Not documented in FACTS)	Unknown	442	31	473	93.45%	435	98.42%
Totals		25108	1204	25839	97.17%	24466	97.44%

Section G. Financial Information

1. Payment Limitations

A. Title IV-B, Subpart 1

New Mexico is not spending more Title IV-B Subpart 1 funds than the state expended for child care, foster care maintenance, and adoption assistance payments.

New Mexico's IV-B Subpart 1 funds for child care, foster care maintenance and adoption assistance payments for FY 2020 does not exceed the amount expended in FY 2005, \$454,505. New Mexico's expenditure of non-Federal funds used as a match for Title IV-B Subpart 1 funds for foster care maintenance for FY 2020 does not exceed the amount expended in FY 2005, \$3,152,282. New Mexico's current federal spending on Title IV-B Subpart 1 – Child Welfare Social Services \$1,485,192. The difference in spending in FY 2020 and FY 2005 is \$1,030,687.

The most recent completed CFS-101 reflects a Total of \$337,992 of which includes an additional requested 10% of Administrative Cost.

B. Title IV-B, Subpart 2

New Mexico's expenditure for Title IV-B Subpart 2 funds for FY 2019 of \$2,770,577.19 exceeds the FY 1992 base year amount expended of \$2,148,100. Through the Title IV-E Subpart 2 supported services of the Community Based Prevention, Intervention and Reunification (CBPIR) contracts, 24% of families received Family Support Services; 17% of families received Family Preservation Services; and 17% Time Limited Reunification Services. New Mexico served 1% of families through Adoption Promotion Support Services. New Mexico did not exceed the 10% allocation for Administrative Costs and Other Service Related Activities.

As reported in previous sections, FY19 is the first year of the Community Based Prevention, Intervention and Reunification (CBPIR) contracts. At the completion of the full year of the CBPIR contracts, will be better able to review and assess what the primary factors were for the amounts spent in each area; however, it appears that the families of New Mexico are in most need of the services offered through Family Support Services and Family Preservation Services.

Further, in-depth exploration is also needed to determine the factors leading to the lower level of use of Time Limited Reunification as New Mexico has historically struggled to maximize the use of this service.

C. Chafee Program

- 2. Current Year Funding—FY 2020 Reallotments, Requests for Additional Funding and Submitting a Revised CFS-101 Budget Request (See Attached)**
- 3. FY 2021 Budget Request—CFS-101, Parts I and II (See Attached)**
- 4. FY 2018 Title IV-B Expenditure Report—CFS-101, Part III (See Attached)**
- 5. Expenditure Periods and Submission of Standards Form 425 (SF-425) Federal Financial Report**