

## Section I – General Information

<b>Name of State Agency</b>	
<b>New Mexico</b> <b>Children, Youth &amp; Families Department</b>	
<b>Period Under Review</b>	
<p>Onsite Review Sample Period: April 1, 2006 through September 30, 2006 for foster care sample and April 1, 2006 through November 30, 2006 for in-home sample.</p> <p>Period of AFCARS Data: FY05a06b.</p> <p>Period of NCANDS Data (or other approved source; please specify if alternative data source is used): FY05a06b.</p>	
<b>State Agency Contact Person for the Statewide Assessment</b>	
<b>Name:</b>	<b>Maryellen Bearzi</b>
<b>Title:</b>	<b>Administrative Deputy Director</b>
<b>Address:</b>	<b>CYFD Protective Services</b>
	<b>P.O. Drawer 5160</b>
	<b>Santa Fe, NM 87502-5160</b>
<b>Phone:</b>	<b>505.827.8400</b>
<b>Fax:</b>	<b>505.827.8480</b>
<b>E-mail:</b>	<b>Maryellen.Bearzi@state.nm.us</b>

## I. AGENCY DESCRIPTION

### A. The Agency

The New Mexico Children, Youth and Families Department (CYFD/Agency/Department) was created by the New Mexico Legislature, effective July 1, 1991. The Department includes Juvenile Justice Services (JJS), Protective Services (PS), Family Services (FS), Administrative Services (AS), Information Technology Services (ITS), and the Office of the Secretary (OTS). Each service area has a Director who reports to the Secretary. CYFD is the designated agency to administer Titles IV-B and IV-E programs, the Child Abuse Prevention and Treatment Act (CAPTA) Plan, and the Independent Living Programs in the State of New Mexico.

### B. The Child Welfare System

New Mexico is directing this statewide self assessment of the child welfare system in accordance with Administration for Children and Families (ADF) requirements. Because of this system orientation, key stakeholders are numerous and include Children, Youth and Families Department, the District Courts, Guardian *ad Litem*s (GAL), Youth Attorneys, Respondent Attorneys, Court Appointed Special Advocates (CASA), Citizen Review Boards (CRB), the Behavioral Health Purchasing Collaborative (Collaborative), law enforcement, service providers, legislators, advocates, foster parents, parents, children and youth, and others.

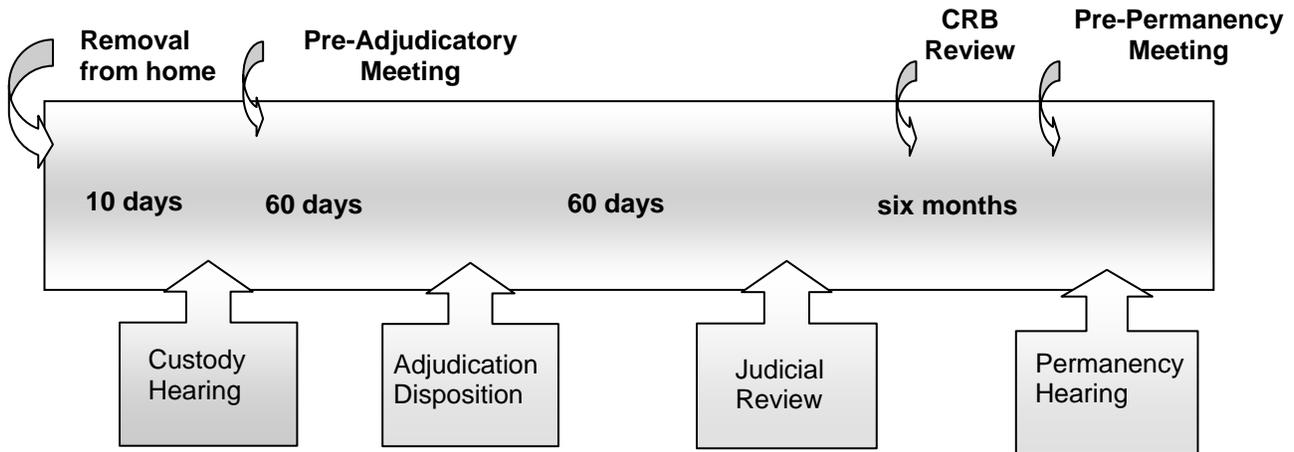
New Mexico's child abuse/neglect system, governed by the State's Children's Code (NMSA 1978, §32A-4-1 *et. seq.*), is complex, and includes multiple layers of interagency involvement and oversight. Protective Services staff investigate reports of abuse and/or neglect and are responsible for the provision of in-home, out-of-home care or other services needed by the child and family. The State's District Courts make judicial determinations regarding the occurrence of abuse and/or neglect and the need for the State to take custody of the child. The District Courts conduct regular judicial reviews and annual permanency hearings of the cases.

The Children's Code requires the court to appoint a GAL for a child under age 14. The GAL represents the child's best interests. The Code also requires the court to appoint a Youth Attorney for a child age 14 or older. The Youth Attorney represents the child's expressed wishes. In addition, the Code provides that respondents in an abuse/neglect case, if determined to be indigent, be appointed counsel. Court-appointed attorneys (GALs, Youth Attorneys, and Respondent Attorneys) are paid by the district court, either on a contract or case-by-case basis, through a state-appropriated "Fee Fund" administered by the Administrative Office of the Courts. In addition, by Code and Court Rule, the CRB Project and local CASA programs provide the child welfare system with oversight and advocacy.

#### 1. The New Mexico Children's Code

The New Mexico Children's Code was originally enacted in 1978, merging the dependency system and laws with the delinquency system and laws. The Code was substantially amended in 1993, when, among other changes, the Children's Mental Health Code and the State Adoption Act were incorporated. In 1997, the Code was again amended, largely due to the efforts of the State's Court Improvement Project. The 1997 changes included new time frames for required judicial events, the implementation of permanency hearings, and new requirements for mandatory pre-adjudicatory and pre-permanency hearing meetings involving all parties. These changes, which went into effect in July 1997, pre-dated federal changes required by the Adoption and Safe Families Act (ASFA). Most recently, the Code was amended in 2005. These amendments included the creation of the Youth Attorney for children under age 14, changes in the conduct and timing of permanency hearings and other revisions.

The Children's Code time frames for abuse/neglect cases are as follows



When CYFD has filed a petition alleging that a child has been abused or neglected, the court must hold a custody hearing within 10 days of the petition. Within 60 days of the petition being served, there must be an adjudicatory hearing. The dispositional hearing, if not held simultaneously with the adjudicatory hearing, as is typically the case, must commence within 30 days of adjudication. An initial judicial review is required at 60 days, and the permanency hearing is held within six months of that review, no later than 12 months after the child was removed from home. When a child remains in custody after the permanency hearing, there will be a judicial review at least every six months and a Permanency Hearing every twelve months until the case is dismissed.

Prior to the adjudicatory hearing, all parties are required to attend a pre-adjudicatory meeting and attempt to settle issues and develop a proposed treatment plan. Prior to the permanency hearing, all parties are required to attend a pre-permanency meeting and attempt to settle issues and determine a permanency plan for the child. In addition, the local CRB may review the case prior to the permanency hearing and prior to any subsequent judicial reviews and make recommendations to the court.

## 2. The District Courts

In New Mexico, the district court, the trial court of general jurisdiction, has original jurisdiction in all matters involving juveniles and domestic relations, including child abuse/neglect. The state's 33 counties are divided into 13 judicial districts. Every judicial district has a chief judge selected by judges in that district for a maximum term of three years.

Most judges who hear children's cases rotate into their Children's Court assignments, usually for two or three years, and typically hear a range of civil and criminal cases as well as children's cases. Judges in at least three judicial districts (the 1st, 2nd, and 3rd) have "permanent" Children's Court assignments, although only in the 1st and 2nd do judges "specialize" in cases involving children and youth. In some cases judges choose specialized caseloads by self-selection. In a few districts, there are no designated children's court judges; child abuse/neglect cases are assigned randomly. Once assigned, however, barring unusual circumstances, an abuse/neglect case in all district courts remains with the same judge from beginning to end, including termination of parental rights proceedings, should they occur.

## 3. CYFD Protective Services

The overall management of CYFD Protective Services is centralized in Santa Fe. The intake function for PS is handled through the Statewide Centralized Intake (SCI) unit housed in Albuquerque. CPS investigation, in-home services, permanency planning, and placement workers are located in field offices in almost all of the state's 33 counties.

CYFD employs Children's Court Attorneys in each judicial district, under the supervision of four Regional Managing Attorneys and under the general direction of the Chief Children's Court Attorney. The Children's Court Attorneys represent the Agency in court, including filing the original Abuse/Neglect Petition, preparing and filing motions for

termination of parental rights, requesting settings for other required hearings and reviews, and presenting evidence and testimony as needed. In addition, Children's Court Attorneys participate in the mandatory pre-hearing meetings and other case staffing activities.

CYFD manages contracted services for Title IV-B part II in the areas of family support, mid-level family preservation, time-limited reunification and adoption promotion and support. CYFD also administers youth services programs funded by the Foster Care Independence Act, through a combination of field staff and contract services.

#### 4. The Citizen Review Board (CRB)

In 1983 the Citizens Substitute Care Review Act was incorporated into the Children's Code (32A-8), establishing "a permanent system for independent and objective monitoring of children placed in the custody of the Department." There are 37 local CRBs and over 200 trained volunteer board members statewide. In cases of alleged child abuse/neglect the Code requires the Department to submit copies of the dispositional order and notice of the initial judicial review to the CRB in advance of that judicial review. Prior to the first permanency hearing, and any subsequent judicial reviews, the Department submits a progress report regarding the child to the local CRB, which may review the case and make recommendations to the court.

In addition to case-specific recommendations to the court, the state CRB Project prepares an annual report, summarizing statewide data and making recommendations to CYFD, the courts, and the legislature relating to substitute care. CRB data have been used in the preparation of this statewide assessment.

#### 5. The Court Appointed Special Advocates (CASA) Program

Under the New Mexico Children's Code (§32A-1-4[D]) and Children's Court Rule 10-121(C), a children's court judge may appoint a Court Appointed Special Advocate (CASA) in an abuse/neglect case "who assists the court in determining the best interests of the child by investigating the case and submitting a report to the court." The mission of the CASA program is to provide effective volunteer advocacy for the best interests of abused and neglected children involved in the court system, with the goal of ensuring that every child has a safe, supportive and permanent home.

The CASA has an official role in the judicial proceeding, working alongside professionals within the scope of Court Rules. CASAs aid in determining the best interests of the child by investigating the facts of the situation, when directed by the court, and submitting reports to the parties. CASAs also monitor compliance with the treatment plan and submit reports to the court and the parties after adjudication.

Since its inception in New Mexico in 1985, CASA has grown to 16 programs and 20 offices operating in 29 of the state's 33 counties, with over 700 volunteers. CASA programs are supported by the New Mexico CASA Statewide Network, which provides training and technical assistance, quality assurance and quality improvement activities, and monitoring, auditing and oversight.

#### 6. The Mediation Program

In March 2000, the Administrative Office of the Courts (AOC) began work with CYFD to pilot the use of mediation in abuse and neglect cases, as designed by the Court Improvement Project. The project began in four counties in four judicial districts. During the past six years, the project has grown to include 23 counties in nine judicial districts. The project has expanded to provide families greater access to mediation. Cases were initially mediated only at the "legal" stage (*i.e.*, once a child had been removed from the home), but are now being mediated in some judicial districts at the investigation and pre-legal stages and in cases where families are involved with both protective services and juvenile justice services.

Program quality has consistently improved over the past four years, and independent evaluation results have been positive. An observed result of the expanded mediation services is that those families who mediate are more likely to comply with their treatment plans. Judges and attorneys report that the legal process has become less adversarial and

less litigious as a result of mediation. Moreover, there is also evidence that mediation reduces the amount of time parties spend in contested hearings subsequent to mediation. In the last year, mediators have also been trained to mediate Open Adoption Contact Agreements.

## **7. Access and Visitation Program**

The federal Administration on Children and Families initially funded the access and visitation program through the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The access and visitation program was established to provide parents a safe place for parent/child visitations or exchanges of children between parents in cases of child abuse/neglect, separation, divorce, substance abuse, mental illness or family violence.

Access and visitation programs in New Mexico are now funded through the AOC and/or through CYFD reimbursement. The programs serve local courts, which routinely write the local access and visitation program services into their court orders, stipulating the level of supervision required. Access and visitation programs tend to be broadly supported by the community, and programs have actively recruited the support of judges, lawyers, community leaders, social service agencies, and others.

Positive outcomes of access and visitation programs include continuity of the non-custodial parent/child relationship, prevention of further violence, improved child well-being, and limits on the revolving door nature of cases that historically have clogged the courts with requests for changes in court orders and visitations.

## **8. Behavioral Health Purchasing Collaborative (BHPC)**

In 2004, the Legislature created an Interagency Behavioral Health Purchasing Collaborative (Collaborative), consisting of 21 state agencies, to develop and coordinate a single, statewide behavioral health care system. The Collaborative aims to manage and improve issues such access to evidence-based care, coordination of public and private agencies and providers, and working in the community through a contract with one statewide entity, ValueOptions New Mexico, to manage a single, statewide provider network.

## II. SAFETY AND PERMANENCY DATA

### New Mexico Child and Family Services Review Data Profile: February 26, 2007

CHILD SAFETY PROFILE	Fiscal Year 2004ab						Fiscal Year 2005ab						12-Month Period Ending 03/31/2006 <sup>A</sup>					
	Reports	%	Duplic. Childn. <sup>2</sup>	%	Unique Childn. <sup>2</sup>	%	Reports	%	Duplic. Childn. <sup>2</sup>	%	Unique Childn. <sup>2</sup>	%	Reports	%	Duplic. Childn. <sup>2</sup>	%	Unique Childn. <sup>2</sup>	%
<b>I. Total CA/N Reports Disposed<sup>1</sup></b>	16,445		26,324		21,851		20,225		32,950		27,100		17,448		28,186		23,629	
<b>II. Disposition of CA/N Reports<sup>3</sup></b>																		
Substantiated & Indicated	4,010	24.4	6,333	24.1	5,610	25.7	4,637	22.9	7,285	22.1	6,519	24.1	4,165	23.9	6,491	23.0	5,880	24.9
Unsubstantiated	12,425	75.6	19,974	75.9	16,238	74.3	15,588	77.1	25,665	77.9	20,581	75.9	13,283	76.1	21,695	77.0	17,749	75.1
Other	10	0.1	17.0	0.1	3.0	0												
<b>III. Child Cases Opened for Services<sup>4</sup></b>			2,524	39.9	2,092	37.3			3,074 <sup>B</sup>	42.2	2,650	40.7			2,795	43.1	2,425	41.2
<b>IV. Children Entering Care Based on CA/N Report<sup>5</sup></b>			1,361	21.5	1,085	19.3			1,477	20.3	1,239	19.0			1,352	20.8	1,148	19.5
<b>V. Child Fatalities<sup>6</sup></b>					3 <sup>C,D</sup>	0.1					7 <sup>C,D</sup>	0.1					6 <sup>C,D</sup>	0.1
<b>STATEWIDE AGGREGATE DATA USED TO DETERMINE SUBSTANTIAL CONFORMITY</b>																		
<b>VI. Absence of Maltreatment Recurrence<sup>7</sup> [Standard: 94.6% or more]<sup>D</sup></b>					2,592 of 2,881	90.0 <sup>E</sup>					2,695 of 2,950	91.4 <sup>E</sup>					2,825 of 3,089	91.5 <sup>E</sup>
<b>VII. Absence of Child Abuse and/or Neglect in Foster Care<sup>8</sup> (12 months) [standard 99.68% or more]<sup>E</sup></b>					4,034 of 4,058	99.41 D, E					4,338 of 4,353	99.66 D, E					4,388 of 4,412	99.46 D, E

The Permanency Data for the 12-month period ending March 31, 2006 was based on the annual file created on 2/12/2007. All CFSR Round One safety Results are on page 2; Permanency Round one results are on page 15. Safety (NCANDS) results are based on new data, updated by NM as of February 2007.

1

## New Mexico Child and Family Services Review Data Profile: February 26, 2007

<b>Additional Safety Measures For Information Only (no standards are associated with these):</b>																		
	<b>Fiscal Year 2004ab</b>						<b>Fiscal Year 2005ab</b>						<b>12-Month Period Ending 03/31/2006</b>					
	Hours				Unique Childn. <sup>2</sup>	%	Hours				Unique Childn. <sup>2</sup>	%	Hours				Unique Childn. <sup>2</sup>	%
<b>VIII. Median Time to Investigation in Hours (Child File)<sup>9</sup></b>	E, F						E, F						E, F					
<b>IX. Mean Time to Investigation in Hours (Child File)<sup>10</sup></b>	E, F						E, F						E, F					
<b>X. Mean Time to Investigation in Hours (Agency File)<sup>11</sup></b>	F, G						F, G						F, G					
<b>XI. Children Maltreated by Parents While in Foster Care.<sup>12</sup></b>				39 of 4,058	0.96					59 of 4,353	1.36					33 of 4,412	0.75	
<b>CFSR Round One Safety Measures to Determine Substantial Conformity (Used primarily by States completing Round One Program Improvement Plans, but States may also review them to compare to prior performance)</b>																		
	<b>Fiscal Year 2004ab</b>						<b>Fiscal Year 2005ab</b>						<b>12-Month Period Ending 03/31/2006</b>					
	Reports	%	Duplic. Childn. <sup>2</sup>	%	Unique Childn. <sup>2</sup>	%	Reports	%	Duplic. Childn. <sup>2</sup>	%	Unique Childn. <sup>2</sup>	%	Reports	%	Duplic. Childn. <sup>2</sup>	%	Unique Childn. <sup>2</sup>	%
<b>XII. Recurrence of Maltreatment<sup>13</sup> [Standard: 6.1% or less]</b>				289 of 2,881	10					255 of 2,950	8.6					264 of 3,089	8.6	
<b>XIII. Incidence of Child Abuse and/or Neglect in Foster Care<sup>14</sup> (9 months) [standard 0.57% or less]</b>				19 of 3,598	0.53					13 of 3,847	0.34					7 of 3,905	0.18	

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## New Mexico Child and Family Services Review Data Profile: February 26, 2007

<b>NCANDS data completeness information for the CFSR</b>			
Description of Data Tests	Fiscal Year 2004ab	Fiscal Year 2005ab	12-Month Period Ending 03/31/2006
<b>Percent of duplicate victims in the submission</b> [At least 1% of victims should be associated with multiple reports (same CHID). If not, the State would appear to have frequently entered different IDs for the same victim. This affects maltreatment recurrence]	10.80	9.97	9.13
<b>Percent of victims with perpetrator reported</b> [File must have at least 75% to reasonably calculate maltreatment in foster care]	100	100	100
<b>Percent of perpetrators with relationship to victim reported</b> [File must have at least 75%]	79.60	78.35	79.58
<b>Percent of records with investigation start date reported</b> [Needed to compute mean and median time to investigation]	Not reported	Not reported	Not Reported
<b>Average time to investigation in the Agency file</b> [PART measure] <sup>G</sup>	Not reported	Not reported	Not reported
<b>Percent of records with AFCARS ID reported in the Child File</b> [Needed to calculate maltreatment in foster care by the parents; also, all Child File records should now have an AFCARS ID to allow ACF to link the NCANDS data with AFCARS. This is now an all-purpose unique child identifier and a child <b>does not have to be in foster care to have this ID</b> ]	100	100	100

### FOOTNOTES TO DATA ELEMENTS IN CHILD SAFETY PROFILE

Each maltreatment allegation reported to NCANDS is associated with a disposition or finding that is used to derive the counts provided in this safety profile. The safety profile uses three categories. The various terms that are used in NCANDS reporting have been collapsed into these three groups.

Disposition Category	Safety Profile Disposition	NCANDS Maltreatment Level Codes Included
A	Substantiated or Indicated (Maltreatment Victim)	“Substantiated,” “Indicated,” and “Alternative Response Disposition Victim”
B	Unsubstantiated	“Unsubstantiated” and “Unsubstantiated Due to Intentionally False Reporting”
C	Other	“Closed-No Finding,” “Alternative Response Disposition – Not a Victim,” “Other,” “No Alleged Maltreatment,” and “Unknown or Missing”

Alternative Response was added starting with the 2000 data year. The two categories of Unsubstantiated were added starting with the 2000 data year. In earlier years there was only the category of Unsubstantiated. The disposition of “No alleged maltreatment” was added for FYY 2003. It primarily refers to children who receive an investigation or assessment because there is an allegation concerning a sibling or other child in the household, but not themselves, AND whom are not found to be a victim of maltreatment. It applies as a Maltreatment Disposition Level but not as a Report Disposition code because the Report Disposition cannot have this value (there must have been a child who was found to be one of the other values.)

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## New Mexico Child and Family Services Review Data Profile: February 26, 2007

Starting with FFY 2003, the data year is the fiscal year.

**Starting with FFY2004, the maltreatment levels for each child are used consistently to categorize children. While report dispositions are based on the field of report disposition in NCANDS, the dispositions for duplicate children and unique children are based on the maltreatment levels associated with each child. A child victim has at least one maltreatment level that is coded “substantiated,” “indicated,” or “alternative response victim.” A child classified as unsubstantiated has no maltreatment levels that are considered to be victim levels and at least one maltreatment level that is coded “unsubstantiated” or “unsubstantiated due to intentionally false reporting.” A child classified as “other” has no maltreatment levels that are considered to be victim levels and none that are considered to be unsubstantiated levels. If a child has no maltreatments in the record, and report has a victim disposition, the child is assigned to “other” disposition. If a child has no maltreatments in the record and the report has either an unsubstantiated disposition or an “other” disposition, the child is counted as having the same disposition as the report disposition.**

1. The data element, “Total CA/N Reports Disposed,” is based on the reports received in the State that received a disposition in the reporting period under review. The number shown may include reports received during a previous year that received a disposition in the reporting year. Counts based on “reports,” “duplicated counts of children,” and “unique counts of children” are provided.
2. The duplicated count of children (report-child pairs) counts a child each time that (s)he was reported. The unique count of children counts a child only once during the reporting period, regardless of how many times the child was reported.
3. For the column labeled “Reports,” the data element, “Disposition of CA/N Reports,” is based on upon the highest disposition of any child who was the subject of an investigation in a particular report. For example, if a report investigated two children, and one child is found to be neglected and the other child found not to be maltreated, the report disposition will be substantiated (Group A). The disposition for each child is based on the specific finding related to the maltreatment(s). In other words, of the two children above, one is a victim and is counted under “substantiated” (Group A) and the other is not a victim and is counted under “unsubstantiated” (Group B). In determining the unique counts of children, the highest finding is given priority. If a child is found to be a victim in one report (Group A), but not a victim in a second report (Group B), the unique count of children includes the child only as a victim (Group A). The category of “other” (Group C) includes children whose report may have been “closed without a finding,” children for whom the allegation disposition is “unknown,” and other dispositions that a State is unable to code as substantiated, indicated, alternative response victim, or unsubstantiated.
4. The data element, “Child Cases Opened for Services,” is based on the number of victims (Group A) during the reporting period under review. “Opened for Services” refers to post-investigative services. The duplicated number counts each time a victim’s report is linked to on-going services; the unique number counts a victim only once regardless of the number of times services are linked to reports of substantiated maltreatment.

## New Mexico Child and Family Services Review Data Profile: February 26, 2007

5. The data element, “Children Entering Care Based on CA/N Report,” is based on the number of victims (Group A) during the reporting period under review. The duplicated number counts each time a victim’s report is linked to a foster care removal date. The unique number counts a victim only once regardless of the number of removals that may be reported.
6. The data element “Child Fatalities” counts the number of children reported to NCANDS as having died as a result of child abuse and/or neglect. Depending upon State practice, this number may count only those children for whom a case record has been opened either prior to or after the death, or may include a number of children whose deaths have been investigated as possibly related to child maltreatment. For example, some States include neglected-related deaths such as those caused by motor vehicle or boating accidents, house fires or access to firearms, under certain circumstances. The percentage is based on a count of unique victims of maltreatment for the reporting period.
7. The data element “Absence of Recurrence of Maltreatment” is defined as follows: Of all children who were victims of substantiated or indicated maltreatment allegation during the first 6 months of the reporting period, what percent were not victims of another substantiated or indicated maltreatment allegation within a 6-month period. This data element is used to determine the State’s substantial conformity with Safety Outcome #1.
8. The data element “Absence of Child Abuse/or Neglect in Foster Care” is defined as follows: Of all children in foster care during the reporting period, what percent were not victims of substantiated or indicated maltreatment by foster parent or facility staff member. This data element is used to determine the State’s substantial conformity with Safety Outcome #2. A child is counted as not having been maltreated in foster care if the perpetrator of the maltreatment was not identified as a foster parent or residential facility staff. Counts of children not maltreated in foster care are derived by subtracting NCANDS count of children maltreated by foster care providers from AFCARS count of children placed in foster care. The observation period for this measure is 12 months. The number of children not found to be maltreated in foster care and the percentage of all children in foster care are provided
9. Median Time to Investigation in hours is computed from the Child File records using the Report Date and the Investigation Start Date (currently reported in the Child File in mmddyyyy format). The result is converted to hours by multiplying by 24.
10. Mean Time to investigation in hours is computed from the Child File records using the Report Date and the Investigation Start Date (currently reported in the Child File in mmddyyyy format). The result is converted to hours by multiplying by 24. Zero days difference (both dates are on the same day) is reported as “under 24 hours”, one day difference (investigation date is the next day after report date) is reported as “at least 24 hours, but less than 48 hours”, two days difference is reported as “at least 48 hours, but less than 72 hours”, etc.
11. Average response time in hours between maltreatment report and investigation is available through State NCANDS Agency or SDC File aggregate data. "Response time" is defined as the time from the receipt of a report to the time of the initial investigation or assessment. Note that many States calculate the initial investigation date as the first date of contact with the alleged victim, when this is appropriate, or with another person who can provide information essential to the disposition of the investigation or assessment.

## New Mexico Child and Family Services Review Data Profile: February 26, 2007

12. The data element, “Children Maltreated by Parents while in Foster Care” is defined as follows: Of all children placed in foster care during the reporting period, what percent were victims of substantiated or indicated maltreatment by parent. This data element requires matching NCANDS and AFCARS records by AFCARS IDs. Only unique NCANDS children with substantiated or indicated maltreatments and perpetrator relationship “Parent” are selected for this match. NCANDS report date must fall within the removal period found in the matching AFCARS record.
13. The data element, “Recurrence of Maltreatment,” is defined as follows: Of all children associated with a “substantiated” or “indicated” finding of maltreatment during the first six months of the reporting period, what percentage had another “substantiated” or “indicated” finding of maltreatment within a 6-month period. The number of victims during the first six-month period and the number of these victims who were recurrent victims within six months are provided. This data element was used to determine the State’s substantial conformity with Safety Outcome #1 for CFSR Round One.
14. The data element, “Incidence of Child Abuse and/or Neglect in Foster Care,” is defined as follows: Of all children who were served in foster care during the reporting period, what percentage were found to be victims of “substantiated” or “indicated” maltreatment. A child is counted as having been maltreated in foster care if the perpetrator of the maltreatment was identified as a foster parent or residential facility staff. Counts of children maltreated in foster care are derived from NCANDS, while counts of children placed in foster care are derived from AFCARS. The observation period for these measures is January-September because this is the reporting period that was jointly addressed by both NCANDS and AFCARS at the time when NCANDS reporting period was a calendar year. The number of children found to be maltreated in foster care and the percentage of all children in foster care are provided. This data element was used to determine the State’s substantial conformity with Safety Outcome #2 for CFSR Round One.

### Additional Footnotes

- A. The 2005B-2006A time period corresponds to the date range of 1-APR-2005 to 31-MAR-2006.
- B. During FFY2005, substantial efforts and resources were directed toward clearing a backlog of investigations that had been pending completion in NM FACTS (**F**amily and **C**hild **T**racking **S**ystem). During FFY2005, NM completed approximately 4,000 more investigations than were completed during FFY2004 (an approximate 25 % increase).
- C. In FFY2004 and FFY2005 submissions, the modified mapping/coding resulted in a significant variation from previous submissions in the services reported as post-investigation services.
- D. For all year's shown on the profile, New Mexico made significant changes to the NCANDS mapping/coding to improve the accuracy of New Mexico’s data. This rewrite has provided more complete and accurate information, including incidents of child fatality.

In 2004, NM reported 8 fatalities in the Agency File. In 2005, NM reported 5 additional fatalities in the Agency File. For 2005B-2006A, NM did not submit an Agency File.

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## **New Mexico Child and Family Services Review Data Profile: February 26, 2007**

E. For all years shown on the profile, the modifications to the mapping/coding included refining the relationships that more accurately reflect incidents of CA/N in foster care. Additionally, modifications were made to more accurately reflect the individual report/ allegation finding for each victim rather than the overall investigation finding. As a result, the modified mapping/ coding resulted in a significant variation and more accurate data regarding in the number of incidents of CA/N in foster care from previous NCANDS submissions.

F. In previous submissions, New Mexico reported the system-generated investigation date that was created in FACTS, which is not consistent with NCANDS definition of this data element. As part of the mapping/coding changes, New Mexico elected to not report this data until it could do so more accurately. The NCANDS mapping and coding will be modified following release to include Investigation Start Date for subsequent submissions.

G. NM does not report average time to investigation in hours in the Agency file.

## New Mexico Child and Family Services Review Data Profile: February 26, 2007

POINT-IN-TIME PERMANENCY PROFILE	Federal FY 2004ab		Federal FY 2005ab		12-Month Period Ending 03/31/2006	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
<b>I. Foster Care Population Flow</b>						
Children in foster care on first day of year <sup>1</sup>	1,819		2,114		2,229	
Admissions during year	2,239		2,239		2,183	
Discharges during year	1,823		2,039		2,085	
Children discharging from FC in 7 days or less (These cases are excluded from length of stay calculations in the composite measures)	879 (48.2% of discharges)		878 (43.1% of discharges)		917 (44.0% of discharges)	
Children in care on last day of year	2,242		2,314		2,328	
Net change during year	423		200		99	
<b>II. Placement Types for Children in Care</b>						
Pre-Adoptive Homes	129	5.8	140	6.1	140	6.0
Foster Family Homes (Relative)	526	23.5	570	24.6	556	23.9
Foster Family Homes (Non-Relative)	1,155	51.5	1,192	51.5	1,210	52.0
Group Homes	97	4.3	80	3.5	77	3.3
Institutions	102	4.5	113	4.9	113	4.9
Supervised Independent Living	92	4.1	49	2.1	38	1.6
Runaway	32	1.4	41	1.8	52	2.2
Trial Home Visit	109	4.9	129	5.6	142	6.1
Missing Placement Information	0	0.0	0	0.0	0	0.0
Not Applicable (Placement in subsequent year)	0	0.0	0	0.0	0	0.0
<b>III. Permanency Goals for Children in Care</b>						
Reunification	1,176	52.5	1,306	56.4	1,266	54.4
Live with Other Relatives	30	1.3	30	1.3	32	1.4
Adoption	602	26.9	665	28.7	699	30.0
Long Term Foster Care	103	4.6	69	3.0	26	1.1
Emancipation	157	7.0	113	4.9	137	5.9
Guardianship	65	2.9	59	2.5	64	2.7
Case Plan Goal Not Established	87	3.9	58	2.5	80	3.4
Missing Goal Information	22	1.0	14	0.6	24	1.0

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**New Mexico Child and Family Services Review Data Profile: February 26, 2007**

POINT-IN-TIME PERMANENCY PROFILE	Federal FY 2004ab		Federal FY 2005ab		12-Month Period Ending 03/31/2006	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
<b>IV. Number of Placement Settings in Current Episode</b>						
One	617	27.5	652	28.2	652	28.0
Two	543	24.2	632	27.3	657	28.2
Three	296	13.2	340	14.7	358	15.4
Four	230	10.3	201	8.7	202	8.7
Five	147	6.6	137	5.9	139	6.0
Six or more	409	18.2	352	15.2	320	13.7
Missing placement settings	0	0.0	0	0.0	0	0.0
<b>V. Number of Removal Episodes</b>						
One	1,774	79.1	1,792	77.4	1,779	76.4
Two	377	16.8	432	18.7	438	18.8
Three	72	3.2	78	3.4	93	4.0
Four	15	0.7	9	0.4	12	0.5
Five	4	0.2	3	0.1	6	0.3
Six or more	0	0.0	0	0.0	0	0.0
Missing removal episodes	0	0.0	0	0.0	0	0.0
<b>VI. Number of children in care 17 of the most recent 22 months<sup>2</sup></b> (percent based on cases with sufficient information for computation)	300	24.6	332	25.7	375	29.0
<b>VII. Median Length of Stay in Foster Care</b> (of children in care on last day of FY)	12.1		12.3		12.9	
<b>VIII. Length of Time to Achieve Perm. Goal</b>	<b># of Children Discharged</b>	<b>Median Months to Discharge</b>	<b># of Children Discharged</b>	<b>Median Months to Discharge</b>	<b># of Children Discharged</b>	<b>Median Months to Discharge</b>
Reunification	1,343	0.1	1,476	0.1	1,468	0.1
Adoption	236	25.6	292	31.3	318	28.6
Guardianship	116	17.0	118	15.3	117	14.5
Other	95	9.5	149	22.1	177	19.3
Missing Discharge Reason (footnote 3, page 16)	26	5.0	4	55.6	2	7.0
Total discharges (excluding those w/ problematic dates)	1,816	0.4	2,039	2.1	2,082	2.4
Dates are problematic (footnote 4, page 16)	7	N/A	0	N/A	3	N/A

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**New Mexico Child and Family Services Review Data Profile: February 26, 2007**

<b>Statewide Aggregate Data Used in Determining Substantial Conformity: Composites 1 through 4</b>			
	<b>Federal FY 2004ab</b>	<b>Federal FY 2005ab</b>	<b>12-Month Period Ending 03/31/2006</b>
<b>IX. Permanency Composite 1: Timeliness and Permanency of Reunification</b> <b>[standard: 122.6 or higher].</b> Scaled Scores for this composite incorporate two components	State Score = 120.5	State Score = 119.2	State Score = 109.0
<b>National Ranking of State Composite Scores (see footnote A on page 12 for details)</b>	31 of 47	29 of 47	16 of 47
<b>Component A: Timeliness of Reunification</b> The timeliness component is composed of three timeliness individual measures.			
<b>Measure C1 - 1: Exits to reunification in less than 12 months:</b> Of all children discharged from foster care to reunification in the year shown, who had been in foster care for 8 days or longer, what percent was reunified in less than 12 months from the date of the latest removal from home? (Includes trial home visit adjustment) [national median = 69.9%, 75 <sup>th</sup> percentile = 75.2%]	73.1%	69.4%	64.0%
<b>Measure C1 - 2: Exits to reunification, median stay:</b> Of all children discharged from foster care (FC) to reunification in the year shown, who had been in FC for 8 days or longer, what was the median length of stay (in months) from the date of the latest removal from home until the date of discharge to reunification? (This includes trial home visit adjustment) [national median = 6.5 months, 25 <sup>th</sup> Percentile = 5.4 months (lower score is preferable in this measure <sup>B</sup> )]	Median = 5.4 months	Median = 7.7 months	Median = 8.9 months
<b>Measure C1 - 3: Entry cohort reunification in &lt; 12 months:</b> Of all children entering foster care (FC) for the first time in the 6 month period just prior to the year shown, and who remained in FC for 8 days or longer, what percent was discharged from FC to reunification in less than 12 months from the date of the latest removal from home? (Includes trial home visit adjustment) [national median = 39.4%, 75 <sup>th</sup> Percentile = 48.4%]	27.6%	31.2%	29.1%
<b>Component B: Permanency of Reunification</b> The permanency component has one measure.			
<b>Measure C1 - 4: Re-entries to foster care in less than 12 months:</b> Of all children discharged from foster care (FC) to reunification in the 12-month period prior to the year shown, what percent re-entered FC in less than 12 months from the date of discharge? [national median = 15.0%, 25 <sup>th</sup> Percentile = 9.9% (lower score is preferable in this measure)]	13.1%	9.6%	12.1%

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## New Mexico Child and Family Services Review Data Profile: February 26, 2007

	Federal FY 2004ab	Federal FY 2005ab	12-Month Period Ending 03/31/2006
<b>X. Permanency Composite 2: Timeliness of Adoptions [standard: 106.4 or higher].</b> Scaled Scores for this composite incorporate three components.	State Score = 117.4	State Score = 115.1	State Score = 114.9
<b>National Ranking of State Composite Scores (see footnote A on page 12 for details)</b>	38 of 47	37 of 47	37 of 47
<b>Component A: Timeliness of Adoptions of Children Discharged From Foster Care.</b> There are two individual measures of this component. See below.			
<b>Measure C2 - 1: Exits to adoption in less than 24 months:</b> Of all children who were discharged from foster care to a finalized adoption in the year shown, what percent was discharged in less than 24 months from the date of the latest removal from home? [national median = 26.8%, 75 <sup>th</sup> Percentile = 36.6%]	46.2%	31.8%	34.0%
<b>Measure C2 - 2: Exits to adoption, median length of stay:</b> Of all children who were discharged from foster care (FC) to a finalized adoption in the year shown, what was the median length of stay in FC (in months) from the date of latest removal from home to the date of discharge to adoption? [national median = 32.4 months, 25 <sup>th</sup> Percentile = 27.3 months(lower score is preferable in this measure)]	Median = 25.6 months	Median = 31.3 months	Median = 28.6 months
<b>Component B: Progress Toward Adoption for Children in Foster Care for 17 Months or Longer.</b> There are two individual measures. See below.			
<b>Measure C2 - 3: Children in care 17+ months, adopted by the end of the year:</b> Of all children in foster care (FC) on the first day of the year shown who were in FC for 17 continuous months or longer (and who, by the last day of the year shown, were not discharged from FC with a discharge reason of live with relative, reunify, or guardianship), what percent was discharged from FC to a finalized adoption by the last day of the year shown? [national median = 20.2%, 75 <sup>th</sup> Percentile = 22.7%]	24.4%	30.9%	32.3%
<b>Measure C2 - 4: Children in care 17+ months achieving legal freedom within 6 months:</b> Of all children in foster care (FC) on the first day of the year shown who were in FC for 17 continuous months or longer, and were not legally free for adoption prior to that day, what percent became legally free for adoption during the first 6 months of the year shown? Legally free means that there was a parental rights termination date reported to AFCARS for both mother and father. This calculation excludes children who, by the end of the first 6 months of the year shown had discharged from FC to "reunification," "live with relative," or "guardianship." [national median = 8.8%, 75 <sup>th</sup> Percentile = 10.9%]	17.3%	10.7%	14.9%
<b>Component C: Progress Toward Adoption of Children Who Are Legally Free for Adoption.</b> There is one measure for this component. See below.			
<b>Measure C2 - 5: Legally free children adopted in less than 12 months:</b> Of all children who became legally free for adoption in the 12 month period prior to the year shown (i.e., there was a parental rights termination date reported to AFCARS for both mother and father), what percent was discharged from foster care to a finalized adoption in less than 12 months of becoming legally free? [national median = 45.8%, 75 <sup>th</sup> Percentile = 53.7%]	39.8%	51.2%	47.3%

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**New Mexico Child and Family Services Review Data Profile: February 26, 2007**

	Federal FY 2004ab	Federal FY 2005ab	12-Month Period Ending 03/31/2006
<b>XI. Permanency Composite 3: Permanency for Children and Youth in Foster Care for Long Periods of Time [standard: 121.7 or higher].</b> Scaled Scores for this composite incorporate two components	State Score = 100.2	State Score = 112.7	State Score = 122.9
<b>National Ranking of State Composite Scores (see footnote A on page 12 for details)</b>	10 of 51	20 of 51	37 of 51
<b>Component A: Achieving permanency for Children in Foster Care for Long Periods of Time.</b> This component has two measures.			
<b>Measure C3 - 1: Exits to permanency prior to 18th birthday for children in care for 24 + months.</b> Of all children in foster care for 24 months or longer on the first day of the year shown, what percent was discharged to a permanent home prior to their 18th birthday and by the end of the fiscal year? A permanent home is defined as having a discharge reason of adoption, guardianship, or reunification (including living with relative). [national median 25.0%, 75 <sup>th</sup> Percentile = 29.1%]	25.7%	35.9%	37.9%
<b>Measure C3 - 2: Exits to permanency for children with TPR:</b> Of all children who were discharged from foster care in the year shown, and who were legally free for adoption at the time of discharge (i.e., there was a parental rights termination date reported to AFCARS for both mother and father), what percent was discharged to a permanent home prior to their 18th birthday? A permanent home is defined as having a discharge reason of adoption, guardianship, or reunification (including living with relative) [national median 96.8%, 75 <sup>th</sup> Percentile = 98.0%]	95.2%	91.0%	92.1%
<b>Component B: Growing up in foster care.</b> This component has one measure.			
<b>Measure C3 - 3: Children Emancipated Who Were in Foster Care for 3 Years or More.</b> Of all children who, during the year shown, either (1) were discharged from foster care prior to age 18 with a discharge reason of emancipation, or (2) reached their 18 <sup>th</sup> birthday while in foster care, what percent were in foster care for 3 years or longer? [national median 47.8%, 25 <sup>th</sup> Percentile = 37.5% (lower score is preferable)]	61.7%	52.3%	49.6%

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## New Mexico Child and Family Services Review Data Profile: February 26, 2007

	Federal FY 2004ab	Federal FY 2005ab	12-Month Period Ending 03/31/2006
<b>XII. Permanency Composite 4: Placement Stability [national standard: 101.5 or higher].</b> Scaled scored for this composite incorporates <b>no components</b> but three individual measures (below)	State Score = 76.8	State Score = 80.3	State Score = 82.9
<b>National Ranking of State Composite Scores (see footnote A on page 12 for details)</b>	8 of 51	10 of 51	12 of 51
<b>Measure C4 - 1) Two or fewer placement settings for children in care for less than 12 months.</b> Of all children served in foster care (FC) during the 12 month target period who were in FC for at least 8 days but less than 12 months, what percent had two or fewer placement settings? [national median = 83.3%, 75 <sup>th</sup> Percentile = 86.0%]	76.1%	78.6%	79.0%
<b>Measure C4 - 2) Two or fewer placement settings for children in care for 12 to 24 months.</b> Of all children served in foster care (FC) during the 12 month target period who were in FC for at least 12 months but less than 24 months, what percent had two or fewer placement settings? [national median = 59.9%, 75 <sup>th</sup> Percentile = 65.4%]	49.5%	51.0%	54.2%
<b>Measure C4 - 3) Two or fewer placement settings for children in care for 24+ months.</b> Of all children served in foster care (FC) during the 12 month target period who were in FC for at least 24 months, what percent had two or fewer placement settings? [national median = 33.9%, 75 <sup>th</sup> Percentile = 41.8%]	15.8%	19.2%	21.5%

### Special Footnotes for Composite Measures:

- A. These National Rankings show your State's performance on the Composites compared to the performance of all the other States that were included in the 2004 data. The 2004 data were used for establishing the rankings because that is the year used in calculating the National Standards.
- B. In most cases, a high score is preferable on the individual measures. In these cases, you will see the 75<sup>th</sup> percentile listed to indicate that this would be considered a good score. However, in a few instances, a low score is good (shows desirable performance), such as re-entry to foster care. In these cases, the 25<sup>th</sup> percentile is displayed because that is the target direction for which States will want to strive. Of course, in actual calculation of the total composite scores, these "lower are preferable" scores on the individual measures are reversed so that they can be combined with all the individual scores that are scored in a positive direction, where higher scores are preferable.

## New Mexico Child and Family Services Review Data Profile: February 26, 2007

PERMANENCY PROFILE FIRST-TIME ENTRY COHORT GROUP	Federal FY 2004ab		Federal FY 2005ab		12-Month Period Ending 03/31/2006	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
<b>I. Number of children entering care for the first time in cohort group</b> (% = 1 <sup>st</sup> time entry of all entering within first 6 months)	937	86.9	921	85.1	949	83.7
<b>II. Most Recent Placement Types</b>						
Pre-Adoptive Homes	8	0.9	2	0.2	2	0.2
Foster Family Homes (Relative)	167	17.8	180	19.5	174	18.3
Foster Family Homes (Non-Relative)	525	56.0	517	56.1	550	58.0
Group Homes	113	12.1	92	10.0	76	8.0
Institutions	37	3.9	73	7.9	79	8.3
Supervised Independent Living	1	0.1	7	0.8	4	0.4
Runaway	15	1.6	5	0.5	5	0.5
Trial Home Visit	71	7.6	45	4.9	59	6.2
Missing Placement Information	0	0.0	0	0.0	0	0.0
Not Applicable (Placement in subsequent yr)	0	0.0	0	0.0	0	0.0
<b>III. Most Recent Permanency Goal</b>						
Reunification	502	53.6	461	50.1	459	48.4
Live with Other Relatives	8	0.9	3	0.3	2	0.2
Adoption	31	3.3	58	6.3	56	5.9
Long-Term Foster Care	3	0.3	3	0.3	0	0.0
Emancipation	7	0.7	9	1.0	9	0.9
Guardianship	7	0.7	7	0.8	0	0.0
Case Plan Goal Not Established	372	39.7	378	41.0	415	43.7
Missing Goal Information	7	0.7	2	0.2	8	0.8
<b>IV. Number of Placement Settings in Current Episode</b>						
One	587	62.6	590	64.1	601	63.3
Two	168	17.9	197	21.4	191	20.1
Three	80	8.5	87	9.4	87	9.2
Four	51	5.4	30	3.3	45	4.7
Five	32	3.4	14	1.5	14	1.5
Six or more	19	2.0	3	0.3	11	1.2
Missing placement settings	0	0.0	0	0.0	0	0.0

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**New Mexico Child and Family Services Review Data Profile: February 26, 2007**

PERMANENCY PROFILE FIRST-TIME ENTRY COHORT GROUP (continued)	Federal FY 2004ab		Federal FY 2005ab		12-Month Period Ending 03/31/2006	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
<b>V. Reason for Discharge</b>						
Reunification/Relative Placement	502	93.5	466	93.4	506	94.9
Adoption	2	0.4	4	0.8	0	0.0
Guardianship	6	1.1	10	2.0	7	1.3
Other	19	3.5	18	3.6	20	3.8
Unknown (missing discharge reason or N/A)	8	1.5	1	0.2	0	0.0
	<b>Number of Months</b>		<b>Number of Months</b>		<b>Number of Months</b>	
<b>VI. Median Length of Stay in Foster Care</b>	3.2		2.7		2.7	

<b>ACFARS Data Completeness and Quality Information (2% or more is a warning sign):</b>						
	Federal FY 2004ab		Federal FY 2005ab		12-Month Period Ending 03/31/2006	
	N	As a % of Exits Reported	N	As a % of Exits Reported	N	As a % of Exits Reported
File contains children who appear to have been in care less than 24 hours	0	0.0 %	0	0.0 %	0	0.0 %
File contains children who appear to have exited before they entered	0	0.0 %	0	0.0 %	2	0.0 %
Missing dates of latest removal	7	0.4 %	0	0.0 %	1	0.0 %
File contains "Dropped Cases" between report periods with no indication as to discharge	77	4.2 %	0	0.0 %	1	0.0 %
Missing discharge reasons	26	1.4 %	4	0.2 %	2	0.1 %
	N	As a % of adoption exits	N	As a % of adoption exits	N	As a % of adoption exits
File submitted lacks data on Termination of Parental Rights for finalized adoptions	30	12.7 %	13	4.5 %	10	3.1 %
Foster Care file has different count than Adoption File of (public agency) adoptions (N= adoption count disparity).	28	10.6% fewer in the foster care file.	3	1.0% fewer in the adoption file.	N/A	There is no rolling year adoption file.
	N	Percent of cases in file	N	Percent of cases in file	N	Percent of cases in file
File submitted lacks count of number of placement settings in episode for each child	0	0.0 %	0	0.0 %	0	0.0 %

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**New Mexico Child and Family Services Review Data Profile: February 26, 2007**

**Note: These are CFSR Round One permanency measures. They are intended to be used primarily by States completing Round One Program Improvement Plans, but could also be useful to States in CFSR Round Two in comparing their current performance to that of prior years:**

	Federal FY 2004ab		Federal FY 2005ab		12-Month Period Ending 03/31/2006	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
<b>IX.</b> Of all children who were reunified with their parents or caretakers at the time of discharge from foster care, what percentage was reunified in less than 12 months from the time of the latest removal from home? (4.1) <b>[Standard: 76.2% or more]</b>	1,208	89.5	1,223	82.9	1,192	81.1
<b>X.</b> Of all children who exited care to a finalized adoption, what percentage exited care in less than 24 months from the time of the latest removal from home? (5.1) <b>[Standard: 32.0% or more]</b>	109	46.0	93	31.8	108	34.0
<b>XI.</b> Of all children served who have been in foster care less than 12 months from the time of the latest removal from home, what percentage have had no more than two placement settings? (6.1) <b>[Standard: 86.7% or more]</b>	2,087	85.0	2,114	86.5	2,082	87.4
<b>XII.</b> Of all children who entered care during the year, what percentage re-entered foster care within 12 months of a prior foster care episode? (4.2) <b>[Standard: 8.6% or less]</b>	149	6.7 (85.8% new entry)	167	7.5 (84.4% new entry)	193	8.8 (82.5% new entry)

## New Mexico Child and Family Services Review Data Profile: February 26, 2007

### FOOTNOTES TO DATA ELEMENTS IN THE PERMANENCY PROFILE

<sup>1</sup>The FY 04, FY 05 , and 06 counts of children in care at the start of the year exclude 16 , 18 , and 15 children, respectively. They were excluded to avoid counting them twice. That is, although they were actually in care on the first day, they also qualify as new entries because they left and re-entered again at some point during the same reporting period. To avoid counting them as both "in care on the first day" and "entries," the Children's Bureau selects only the most recent record. That means they get counted as "entries," not "in care on the first day."

<sup>2</sup>We designated the indicator, *17 of the most recent 22 months*, rather than the statutory time frame for initiating termination of parental rights proceedings at *15 of the most 22 months*, since the AFCARS system cannot determine the *date the child is considered to have entered foster care* as defined in the regulation. We used the outside date for determining the *date the child is considered to have entered foster care*, which is 60 days from the actual removal date.

<sup>3</sup>This count only includes case records missing a discharge reason, but which have calculable lengths of stay. Records missing a discharge reason and with non-calculable lengths of stay are included in the cell "Dates are Problematic".

<sup>4</sup>The dates of removal and exit needed to calculate length of stay are problematic. Such problems include: 1) missing data, 2) faulty data (chronologically impossible), 3) a child was in care less than 1 day (length of stay = 0) so the child should not have been reported in foster care file, or 4) child's length of stay would equal 21 years or more. These cases are marked N/A = Not Applicable because no length of stay can legitimately be calculated.

<sup>5</sup>This First-Time Entry Cohort median length of stay was 3.2 in FY 04. This includes 0 children who entered and exited on the same day (who had a zero length of stay). Therefore, the median length of stay was unaffected by any 'same day' children.

<sup>6</sup>This First-Time Entry Cohort median length of stay was 2.7 in FY 05. This includes 0 children who entered and exited on the same day (who had a zero length of stay). Therefore, the median length of stay was unaffected by any 'same day' children.

<sup>7</sup>This First-Time Entry Cohort median length of stay is 2.7 for 06. This includes 0 children who entered and exited on the same day (they had a zero length of stay). Therefore, the median length of stay was unaffected by any 'same day' children.

### III. NARRATIVE ASSESSMENT OF CHILD AND FAMILY OUTCOMES

The assessment of each outcome includes three parts. The first is the Data Summary, which synthesizes the available data from federal and state sources, all of which are presented in this report for each outcome, composite, measure, and item. Virtually all data presented herein in the summaries and item breakdowns were also presented and reviewed by the Statewide Assessment Team (SAT). The second part is the Stakeholder Assessment, which includes information from the Statewide Assessment Team and the youth, foster parent, Tribal, Judges, and New Mexico Children, Youth, and Families Department (CYFD) internal focus groups. This component is directed at evaluating the outcome as a whole, identifying major issues as well as areas for further exploration in the on-site review and Program Improvement Plan (PIP) phases of the Child and Family Services Review (CFSR). The third part of each outcome assessment is an Item-by-Item Evaluation, which includes item-level information on current policy and procedure, an analysis of available data informing the item, a description of the results of the first CFSR; a summary of changes since the first CFSR (including current strengths and assets); and a discussion of barriers in the New Mexico Child Welfare System.

#### SAFETY OUTCOMES

##### A. Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect

###### 1. Data Summary

Safety Outcome 1 is composed of multiple items. The first item is timely response to reports of maltreatment. The data available to inform this outcome include counts of child maltreatment reports, allegation types, and substantiation rates. Timeliness indicators from select period of time were also available. The ACF Data Profile shows volume of activity and detects the 2005 increase that the Statewide Assessment Team (SAT) noted but could not explain other than to speculate about adoption of a new screening tool by the agency and impact of substance abuse on families, specifically methamphetamine activity. The increase did not correspond to any dramatic difference in substantiation rates that have remained level over the three years.

Additional data were drawn from the State's Family and Children Tracking System (FACTS) showing the relative distribution of screened in reports by priority (New Mexico has three priority levels – emergency, priority 1, and priority 2). Over two-thirds of the reports are Priority 2, representing essentially neglect situations. This finding led stakeholders to discuss New Mexico's overall child welfare system as a type of safety net when other services are not available, dictated by poverty and lack of service array. This became a recurrent discussion throughout the assessment and will likely result in many discussions about policy and mission in the Program Improvement Plan (PIP) process.

Substantiation and priority data were presented to the SAT by county. The SAT identified considerable variability across County Offices in terms of substantiation rates – as much as a 35% spread for reports screened in as emergencies. There is also considerable variability across County Offices in terms of substantiation rates by type of allegation – just over 25% spreads for both physical abuse and physical neglect. This did not suggest performance problems per se, but does suggest that a further examination be conducted to achieving a balance between local practice differences and norms and statewide standardization.

To explore whether differences in response by counties might be related to the relative volume of work, the SAT considered the relative percentage of children 0 to 18 years in the population compared to the relative percentage of accepted reports, emergency reports, priority one reports, and priority two reports. The variation between the relative number of children and the relative number of reports is generally small. If data or information could be made available, the SAT would like to examine whether differences are related to the availability of services across counties.

New Mexico has only recently modified FACTS to capture information on timeliness of initiation. Management information reports will be developed. Special quality assurance study results were available to the SAT confirming that overall, response is not as timely as it should be (approximately 70% overall) but is much better for higher priority reports. This analysis resulted in discussions about the "reasonableness" of New Mexico's choices in terms of timeframes – 3 hours, 24 hours, and 5 days respectively for the three priority types.

A second item is absence of maltreatment recurrence. As shown in the ACF Data Profile, New Mexico does not meet the national standard, nor did New Mexico meet the standard in Round One. This is also reflected in data from the FACTS that showed a 6-month absence of maltreatment recurrence rate of 93.1% and a 12 month rate of 89.5%. In an effort to understand why New Mexico's performance is not better, the SAT reviewed the available data. These included an analysis of the demographics of children who experience repeat maltreatment, which yielded only small differences. It also included data from an old QA study done in 2003, acknowledged as only marginally useful because of its being dated. The study showed that the majority of maltreatment recurrence was indicated as physical neglect, with a high incidence of families characterized by substance abuse, domestic violence, mental and physical health needs, and arrest records. The SA again noted the impact of poverty and the lack of a complete service array on the child welfare system.

A third item is absence of maltreatment in foster care. The ACF Data Profile reports absence of child abuse and/or neglect in foster care (12 months). The standard is 99.68% and New Mexico's rate for the 12-month period ending March 31, 2006 was 99.46%. Data from FACTS showed a one-year absence rate of 99.35%. Data from Quality Assurance Reviews conducted in 2005 and 2006 showed this item as a strength in about half the cases.

In an effort to gain insight into this phenomenon, the SAT looked at a demographic analysis that showed little difference, in part because the numbers were too small to detect significant differences. A Quality Assurance review of 40 cases of maltreatment in foster care during CY 2005 did yield some interesting findings. One of the most important findings, even given limits of sample size, was that 28 of the 40 victims (70%) were in relative foster homes. This, along with other information, resulted in a stakeholder emphasis on the need to fully screen and license relative foster placements as early as possible and the suggestion that there was a need for specialized training and support for relative foster care providers.

## 2. Stakeholder Assessment

SAT noted that the largest percentage of children enter our system as neglect cases. The SAT believes this is a reflection of New Mexico's poverty and lack of comprehensive, statewide services, for example substance abuse treatment. They note that the child welfare system is a safety net for families when other services are not available. Quality Assurance data reveal single parents disproportionately identified as perpetrators, and poverty and lack of services as contributing risk factors. The SAT believe that the focus should not be on whether a report is substantiated or unsubstantiated, but whether or not there are adequate services for children and families to address risk and safety. There is also an issue of CYFD resources and workloads/caseloads impacting the agency's ability to respond to New Mexico's reported cases of child maltreatment, which are divided into a three tiered prioritization scheme. They suggested that CYFD look at existing policy around prioritization and initiation time frames in comparison to other states' policies. This task could be considered in the PIP process.

Stakeholders also inquired about the impact of law enforcement having the statutory authority to place children directly in CYFD custody, on the State's rates of repeat maltreatment and re-entry into care. In New Mexico, law enforcement may place children directly into the custody of the agency without any prior contact with the agency. Children are returned to their families unless the Agency files a petition with the court within two days. The majority of children come into custody through emergency custody by law enforcement, and a significant number of children are reunified in less than eight days of entry as a result of CYFD decision not to file a petition.

SAT is concerned about the 0-3 years of age population, noting that it has been established that neglect in the 0-3 population is linked to attachment disorders and critical brain development. They indicated a need for increased training of all stakeholders, and increased home visitation, especially in rural areas of New Mexico. (Currently, there are some pilot projects underway to address issues related to this population).

SAT is also concerned about the wide variation in substantiation rates across counties in New Mexico. They discussed the concept of different thresholds reflecting community norms, context, and culture, balanced against the need to standardize and respond to child maltreatment in a uniform manner. Information obtained during the on-site review could further inform this issue. For the three counties selected, the overall substantiation rate is 19.2% for Bernalillo, 30.8% for Lea, and 22.6% for Santa Fe. (Across all counties, the range is 14.3% to 49.2% overall, with even more variance by type of allegation). SAT suggested that we investigate whether substantiation rates correlate with level of resources/service array and if this may account for some of the variation in substantiation rates across counties.

SAT noted a number of important strengths in the child welfare system including Team Decision Making. This is particularly important when custody decisions for children on emergency law enforcement holds are made by many stakeholders – law enforcement, providers, case workers, parents, *etc.* They also noted the practice of taking cases with more than three referrals to a specialized committee; the use of risk and safety tools; and Department of Health Early Intervention Services (Family Infant Toddler Program).

Judges identified issues related to undocumented/foreign born children or children born to undocumented/foreign born immigrants. They believe more could be done with respect to Special Immigrant Juvenile Status, through collaboration with the Mexican Consulate and other Consulates. These efforts could result in possible revisions to State statute. Another area of discussion focused on the definition of maltreatment and the occurrence thereof in foster care. Some Judges are concerned that maltreatment, as defined by the Children's Code, does not include a wide enough range of issues and conditions for children in foster care.

Tribal stakeholders maintain that CYFD does not always or consistently follow Indian Child Welfare Act (ICWA) standards. They are concerned that CYFD will establish that a child is Native American and stop the investigation process, calling on the respective Tribe to intervene, without considering where the alleged incident of child maltreatment occurred. This varies across the State with communication in Bernalillo and Santa Fe described as positive. The Tribes often feel that the continuation of State intervention is in the best interest of children and noted that Team Decision Making can improve this process.

Foster Parents are concerned that children are often returned too quickly to homes that are not safe. This group believes early return impacts rates of recurrence. They believe that statutory time frames are too short for many cases, especially when parents are involved with methamphetamine and/or other substances. Foster parents would like to see CYFD follow up more frequently with visits to the home once children have been returned. They would also like to see visits between parents and children more closely monitored for safety reasons and believe that caseloads should be lowered to more effectively manage these tasks. Some foster parents believe that too many alleged reports of child maltreatment are screened out; some believe that substantiation rates should be higher.

### 3. Item-by-Item Evaluation

*Item 1. How effective is the child welfare system in responding to incoming reports of child maltreatment in a timely manner?*

#### *a. What do policy and procedure require?*

Policy regarding timeliness has improved since Round One, specifically clarifying the definition of "initiation". CYFD policy requires that CYFD have an organizational structure capable of receiving reports of suspected child abuse or neglect 24 hours a day, seven days a week and that all accepted reports are prioritized. Intake policy defines "prioritization" as the assignment of a time frame for CYFD to initiate an investigation, based upon indicators of immediate danger to the child and mitigating protective factors. Initiation is defined as face-to-face contact by the investigation worker with the alleged victim. Both intake and investigation policy define three priority levels with initiation time frames as follows:

- An Emergency Report is initiated within 3 hours from receipt of a report by Statewide Central Intake (SCI).
- A Priority One Report is initiated within 24 hours from receipt of the report by SCI.
- A Priority Two Report is initiated within 5 calendar days from receipt of the report by SCI.

Investigation procedure details the assignment of reports based on priority and spells out the requirements for the initiation of an investigation and includes provision for documented diligent efforts to establish face-to-face contact with the victim.

#### *b. What do the data show?*

### Overall Substantiation Rates

The data that are reported in the Administration for Children and Families (ACF) Data Profile show the number of reports accepted, the number of duplicated children (each child can be counted multiple times if there are multiple reports), and the number of unique children (regardless of the number of reports) for Federal Fiscal Years (FFY) 2004 and 2005, and for the 12 month period ending 3/31/2006. These are excerpted in the table below:

	# Reports	# Children (duplicate)	Substant. Rate	# Children (unique)	Substant. Rate	# Children Entering Care
FFY 2004	16,445	26,324	24.1%	21,895	25.7%	1085*
FFY 2005	20,225	32,950	22.1%	27,100	24.1%	1239
12 months ending March 31, 2006	17,448	28,186	23.0%	23,629	24.9%	1148

\*This number was reported differently in FY 2004 and is not directly comparable.

There are some items on the [ACF Data Profile](#) that are missing for New Mexico. Specifically, the ACF Data Profile reports mean and median time to investigation in hours, though there are no specific standards. Previously, New Mexico was not able to report information that accurately reflected field practice, as it was not captured in FACTS. The 2006 data modifications to FACTS will allow some reporting in the future.

### Substantiation Rates by Priority and County

FACTS data show that between April 2005 and September 2006, 46,041 reports were received by Statewide Centralized Intake (SCI). Of the 24,941 accepted investigations, 24,657 (54.2%) resulted in an investigation finding and 21,100 (45.8%) were not accepted for investigation. . Of the 24,657 accepted reports with priority levels as designated by SCI:

- o 13.1% (3,227 reports) were screened in as Emergency;
- o 17.9% (4,405 reports) were designated Priority 1; and
- o 69.0% (17,025 reports) were designated Priority 2.

Once the priority level is set by SCI, reports are sent to appropriate County Offices for investigation and investigation decision. Statewide substantiation rates for this time period are:

- o 47.8% of the Emergency reports were substantiated;
- o 31.2% of the Priority 1 reports were substantiated; and
- o 16.8% of the Priority 2 reports were substantiated.
- o Combining all priorities, the substantiation rate is 23.5%

There is considerable variation across County Offices in terms of substantiation rates. Excluding those counties where the number of reports is too small to report reliable percentages, we find that:

- o Substantiation rates across counties range from 35.9% to 70.1% for Emergency reports.
- o Substantiation rates across counties range from 22.7% to 50.3% for Priority 1 reports.
- o Substantiation rates across counties range from 12.2% to 29.6% for Priority 2 reports.

Factors that may account for these different rates include training, number of PS positions, geographical location, service array, and local norms. Data for all counties were provided to the Statewide Assessment Team.

### Substantiated Allegations by Type and County

FACTS data for the period April 2005 through September 2006 show that for the entire State, the majority of substantiation allegations are physical neglect (74.1%), followed by physical abuse (22.6%), and sexual abuse (3.2%). There is some variation in the relative percentages of substantiated allegations across County Offices. Excluding those counties where the number of reports is too small to report reliable percentages, we find that:

- The relative percentage of substantiated physical abuse allegations across counties ranges from 9.6% to 37.2%.
- The relative percentage of substantiated sexual abuse allegations across counties ranges from 1.3% to 10.0%.
- The relative percentage of substantiated physical neglect allegations across counties ranges from 57.8% to 84.8%.

The same factors that contribute to differences in overall substantiation rates may apply here as well. Data for all counties were provided to the Statewide Assessment Team.

### Timeliness of Investigations

Data from Quality Assurance Reviews conducted in 2006 and 2005 show improvement in item strength. Timeliness of initiating investigations was rated as a strength in 63% of the cases reviewed in 2006 and 55% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items. (Overall, Outcome One was rated as 64% substantially achieved in 2006 and 56% in 2005; 24% partially achieved in 2006 and 35% in 2005; and 12% not achieved in 2006 and 9% in 2005.)

Additional data available from Quality Assurance Reviews on cases reviewed in 2005 provide rates of timeliness of investigation by priority level. The data show that:

- 85.9% of completed Emergency investigations had documentation that they were initiated timely (61 of 71 investigations).
- 75.4% of completed Priority One investigations had documentation that they were initiated timely (43 of 57 investigations).
- 60.9% of completed Priority Two investigations had documentation that they were initiated timely (70 of 115 investigations).
- Combining all report types, 174 of 243 investigations were timely for an overall rate of 71.6%.

A special Quality Assurance Review specifically addressing investigation initiation was conducted with all investigations completed during the third quarter of 2005. There were a total of 446 investigations with initiation information documented and timeliness rates were similar to those cited immediately above.

- 95.0% of completed Emergency investigations had documentation that they were initiated timely (57 of 60 investigations)
- 78.3% of completed Priority One investigations had documentation that they were initiated timely (65 of 83 investigations)
- 60.7% of completed Priority Two investigations had documentation that they were initiated timely (184 of 303 investigations)
- Combining all priorities yields a 68.6% timeliness rate from this 2005 study (306 of 446 investigations).

### Relative Safety Caseload/Workload

FACTS data for the period April 2005 through September 2006 were analyzed for purposes of exploring relative workload across County Offices. Specifically, the relative percentage of children 0 to 18 years was compared with the relative percentage of accepted reports, emergency reports, priority one reports, and priority two reports. While there is some variation between the relative number of children and the relative number of reports, it is generally small. Overall, counties have roughly the same share of accepted reports and types as would be expected from the size of their

populations. For example, Bernalillo County has 27.8% of the State's population between 0 and 18 years, 28.6% of the accepted reports, 31.0% of the emergency reports, 27.9% of the priority one reports, and 27.9% of the priority two reports. This data suggests that the centralized processing of CPS reports has provided consistency in screening and prioritization decisions that are reflective of the child population. However this consistency is in stark contrast to the variation in substantiation rates. Data for all counties were provided to the Statewide Assessment Team.

### Monthly Reports

Eighteen County Offices compile monthly reports (these however were not consistently available) that include 12 data elements. One of these elements is initiation within assigned priority (but not by priority type). Since the number of counties and the number of months for which reports were provided is somewhat sporadic, only statewide indicators were useful. These data show that of 4,881 reports received and recorded, 4,615 were initiated in accordance with the priority designation (94.6%). This is not consistent with Quality Assurance data, which reflects overall initiation rates around 70%. Further examination of the data is needed to understand this disparity. Of 1,664 investigations completed by the reporting counties, 984 were completed within 30 days (59.1%). Of those completed, 379 were substantiated (38.5%). Of those substantiated, 139 were assigned to in-home services (36.7%).

#### *c. Where was the child welfare system in Round One of the CFSR?*

In the Round One CFSR, timeliness of initiating investigations of reports of child maltreatment was rated as a strength in 82% of the applicable cases reviewed. The renegotiated PIP goal was to increase timeliness to 70%, which was met in the fourth quarter of calendar year (CY) 2005. Across the three sites in the Round One on-site review, a pattern emerged, per ACF, that emergency cases were frequently handled in accordance with policy (i.e., timely), but that the non-emergency cases were not as frequently handled within the required time period. The data reported above show that this is still the case – the higher the priority, the higher the rate of timely initiation.

#### *d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

Since Round One, CYFD enhanced and made more stringent its policy and procedures to define initiation as face-to-face contact with the alleged victim. CYFD provided training to workers and supervisors on initiation policies and procedures as well as requisite timeframes for initiation of investigations by priority level and on investigation completion. County Offices now track cases internally with a focus on increased supervisory oversight. The National Council on Crime and Delinquency (NCCD) developed two instruments used by SCI as decision-making tools for screening reports of child maltreatment and assigning case priorities. The implementation of this tool corresponds with the increase in the number of reports accepted for investigation and the subsequent increase in the number of children coming into custody. The State's performance is positively impacted by the process used by SCI to call field staff on all emergency reports and any high priority reports received after hours, rather than waiting to notify the county through a written report on FACTS during regular work hours.

The FACTS data system was modified in May 2006 to add a field capturing initiation information so that in the future, management information reports will capture these performance rates. FACTS also issues ticklers when cases have not been opened in a timely fashion.

There has been a steady increase in the number of CPS investigations since Round One and an increase in the number of CPS investigator FTEs in 2005. In the face of increasing reports of child maltreatment, the eight new positions have helped the Agency achieve the first round PIP goal for timely initiations. Also since Round One, CYFD redirected resources to pay workers overtime to complete investigations that may have been initiated on a timely basis but not closed within the 30-day time frame.

While overall rates of timely initiation of investigations showed New Mexico as not in substantial conformity, it should be noted that at least for reports classified as emergencies, initiation has been identified as a strength. In Bernalillo County, assignment checklists, the RATT tool to balance caseloads, and dedicated staff for after-hour duty are promising Agency practices.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

The State's performance is impacted by caseloads and vacancy rates, and numbers of bilingual investigation workers. Performance is also impacted by the geographical distances which must be traveled in this rural state by PS workers and by Border issues, which result in a higher number of undocumented families and Border crossings. There are also fundamental technology issues in rural areas where pagers and cell phones don't always work. Despite the training provided, the disparity between data collected by managers and data reported by Quality Assurance suggests that there may be inconsistencies in interpreting policy requirements.

**Item 2. Repeat Maltreatment. How effective is the child welfare system in reducing the recurrence of maltreatment of children?**

*a. What do policy and procedure require?*

All CYFD policy and procedure related to intake and investigation is in support of reducing the recurrence of maltreatment. CYFD is required to conduct a FACTS search on each newly accepted report to determine if there has been previous involvement with the child welfare system. The information regarding prior involvement is used in making the investigation disposition decision. The concept of repeat maltreatment is operationalized in terms of whether there was a substantiated report within 6 months of a previously substantiated report of child maltreatment. Proper screening and investigation of reports of abuse and neglect lessen the likelihood of subsequent maltreatment.

*b. What do the data show?*

Absence of Maltreatment Recurrence

The data reported in the ACF Data Profile are in terms of "absence of maltreatment recurrence," and the standard is set at 94.6% or higher, which New Mexico does not meet. For FFY 2004, the rate was 90.0% and for FY 2005 it was 91.4%. For the 12-month period ending March 31, 2006, the rate was 91.5%.

Data from the CYFD FACTS system for FY 2006 show a six-month absence of maltreatment recurrence rate of 93.1% and a 12-month rate of 89.5%. Seven of the 29 county offices had rates of 94.6% - the national standard - or higher (some of these are based on small numbers, however). Data for all counties were provided to the Statewide Assessment Team.

Data from Quality Assurance Reviews conducted in 2006 and 2005 show little change in item strength. Absence of repeat maltreatment was rated as a strength in 84% of the cases reviewed in 2006 and 85% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items.

Data from the Citizen Review Board database show that of the 2,055 children reviewed by CRB in FY 2006, 468 (23%) had prior custodies and 1,419 (69%) had prior reports. The 1,419 include children with both substantiated and unsubstantiated reports and those made in other states, when known. No time frame is imposed on these prior reports. CRB reviews only those cases that have been in custody approximately nine months, i.e., those that are scheduled for a permanency hearing.

Demographics of Children Who Experience Repeat Maltreatment

In terms of patterns in the circumstances, characteristics, and demographics of children who experience repeat maltreatment, the FY 2006 data showed that there was little difference in the rates between male and female victims. Youth whose race was reported as white had somewhat higher rates of absence of maltreatment recurrence than non-White (93.0% compared to 90.2%). Of the population reported as White, those from Hispanic origin had somewhat higher rates of absence of maltreatment recurrence than non-Hispanic (93.1% compared to 91.6%). Data for all counties were provided to the Statewide Assessment Team.

### Additional Quality Assurance Data

The only data on repeat maltreatment collected and reported by the Quality Assurance Unit dates back to the fourth quarter of 2003, and thus is only marginally useful for today's inquiry. However, a few highlights are included here, as this is the only source for this in-depth information. The study involved 99 incidents of repeat maltreatment statewide. All repeat maltreatment incidents occurred during the fourth quarter 2003, while the precursor incident occurred sometime in the preceding six months. For each child identified in the sample, the reviewer examined data for the precursor and current referrals.

The repeat maltreatment subjects were largely young (53.5% under 6) from two parent/two partner households. Over half of these households had three or more children. The number of substantiated incidents in the life of the case was 2 or 3 for 83.8%. There were 2 prior substantiated incidents in the period under review for 78% of these youth. The priority designation on these reports was emergency for 39%, with just over two-thirds indicating physical neglect. In 65% the perpetrator was the mother. Almost two-thirds of these families were characterized by substance abuse and 40% by domestic violence. Nearly one-third of the parents had mental or physical health issues and just over one-third had an arrest record. The investigation disposition was most likely to seek custody (43%), followed by referral to community services (26%), and in-home services (12%). The Structured Decision Making (SDM) instruments found 45% "unsafe," with 58% high risk.

In terms of the precursor incident which would have occurred within a period of six months prior to the repeat maltreatment incident, 23% had been designated emergency, again with the majority indicating physical neglect. Not surprisingly, similar characteristics were noted about the families in terms of substance abuse, domestic violence, mental and physical health needs, and arrest records. The substantiated perpetrator was most likely the mother (68%). The investigation disposition was most likely to refer to community services (48%), or in-home services (25%). The SDM found 10% "unsafe," with 31% at high risk.

### Data Systems and Tracking

Systems used by the State for tracking and analyzing repeat maltreatment data include FACTS (not only management reports, but also email notifications regarding new reports); point in time supervisory oversight; staffings with Children's Court Attorneys; and ongoing Quality Assurance Reviews with mini-PIP implementation, by county.

#### *c. Where was the child welfare system in Round One of the CFSR?*

The national standard for recurrence of maltreatment for Round One was expressed in terms of recurrence. The standard was 6.1%; New Mexico's statewide aggregate data for this outcome was 8.3% and thus did not meet the national standard. In terms of case reviews, this item was rated as a strength in 86% of the applicable cases reviewed; 90% was required to be in substantial conformity. The PIP goal was to reduce repeat maltreatment rates from 8.3% to 7.5%, and this goal was achieved.

#### *d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

Revisions and enhancements to policy and procedure have been made since Round One that have improved the screening and prioritization of reports. CYFD also developed a Safety Committee to inform SCI screening; continued to implement TDMs and Family Group Decision Making; provided for point in time supervision; implemented FACTs management reports and email notification; and a design for the expansion of voluntary services with in-home services. The SDM identifies high risk levels so that the child welfare system can provide services to these families even if the case is not substantiated. There is also a pilot Differential Response Unit located in SCI. When a report is screened out as not meeting criteria required for a CPS investigation, and the family lives in Bernalillo County, a staff person from the Unit will call the family to determine if there is any way the Agency might help. Assistance includes connecting families to a wide range of resources for basic needs, such as food and housing supports.

CYFD did meet the recurrence of maltreatment goal in the Round One PIP. In addition, there are enhanced Quality Assurance activities, some expanded community resources; stronger partnerships with providers and other stakeholders;

TDMs; and increased use of contract services (i.e. Mid-Level Family Preservation). Promising practices include TDMs and the focus on collaborative working relationships with community partners in many county offices (e.g., domestic violence programs, schools).

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

Review of the child welfare system reveals resources for families are not sufficient. The typical profile of repeat maltreatment cases is described as a young mom, unsupported, with mental health and/or substance abuse and/or domestic violence issues. Resources to address these problems are inadequate in New Mexico, particularly in some areas. There is also a need to better target resources to the highest risk families.

**B. Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.**

**1. Data Summary**

Safety Outcome Two contains two item indicators and no data indicators. Within this outcome, the SAT considered data available from Round One and Quality Assurance Reviews conducted in 2004, 2005 and 2006. Data are of necessity qualitative. These reviews showed that item 3, services to protect children in their own home and prevent removal was rated as a strength in 63% of the cases in 2004, 67% of the cases in 2005 and 56% of the cases in 2006. For item 4, risk of harm to children, 65% of the cases were rated a strength in 2004, 51% were rated a strength in 2005 and 50% were rated a strength in 2006. Overall rating for Safety Outcome 2 in the Quality Assurance Reviews were 63% substantially Achieved in 2004, 51% in 2005, and 50% in 2006. This is a concern because in the first CFSR, New Mexico was found to be in substantial conformity with all of Safety Outcome 2. In examining this issue, the Agency noted that there have been modifications to the review instrument that would impact 2006 Quality Assurance findings. However, the Agency believes that the performance is reflective of the transitioning into a new model for the provision of voluntary in-home services, the need to better define practice in safety assessment and management and overall workload issues for agency staff. In 2006, the Agency began to include in its Quality Assurance Reviews, mid-level family preservation cases managed by contract agencies. This effort identified the need to provide more training to contract providers around CFSR outcomes.

**2. Stakeholder Assessment**

Statewide Assessment Team (SAT) inquired about the role of communities and local service agencies with regards to in-home services and other voluntary services. They repeated their concerns about local norms, about adequate service array and the roles communities could take in supporting families and protecting children as alternatives to custody.

Stakeholders inquired about the impact of law enforcement having the statutory authority to place children directly in custody, on the State's performance on Safety Outcome 2. In New Mexico, law enforcement may place children directly into the custody of the Agency without any prior contact with the Agency. Subsequently, children are returned to their families unless the Agency files a petition with the court within two days. The majority of children in the New Mexico foster care system come into custody through emergency custody by law enforcement, and a significant number of children (over 40%) are reunified in less than eight days of entry as a result of a CYFD decision not to file a petition, but rather to provide in-home or community based services. The placement of the children in custody provides a payment mechanism for these temporary placements.

There were also questions about the quality of in-home services provided by CYFD and those services provided by contractors. In-home services were revised as part of the PIP, so as to expand capacity and improve access. These desired changes have not been fully realized due to position vacancies, lack of modifications to FACTS to respond to program changes, and a lack of ongoing technical assistance and support for field staff. Data reported in the 2006 state plan revealed higher rates of re-referral and custody for a sample of children receiving in-home services. This suggests that safety management be looked at during the on-site review and/or through the PIP process.

There is some concern that CYFD does not remain engaged with the family long enough after the decision is made that a child is not going into care. It was noted that it is important to keep families engaged with service providers, and

the SAT felt that sometimes there needs to be a push from CYFD to assure continuing family participation in services and child safety. On a related note, some stakeholders are concerned that there should be more home visits and that caseworkers for children and parents should be better trained in what to look for and how to respond to situations constituting a risk to safety. Both concerns are resource issues and need to be looked at in terms of workload and increasing caseloads, perhaps through the on-site review or as part of PIP preparation.

There is some concern that is shared by multiple stakeholders about the screening and licensing of relative foster parents and some concern about the incidence of abuse and neglect in relative foster homes. It was suggested that the training for relative foster parents have a specialized component. This could be examined during the on-site review and continued through the PIP process.

Judges are concerned about foster parents and think that CYFD is very protective about information on foster parents and very protective about placement decisions. Judges would like to be provided more information about foster parents and placement history. They believe that this would help prevent maltreatment in foster care. Judges recognize that by statute and case law, CYFD has placement authority, absent abuse of discretion. Judges are also concerned about the safety of older youth, issues of older youth in detention, and youth who are in runaway status. They also have concerns about teenage pregnancy.

Tribal stakeholders discussed safety in foster care, noting that when home studies are done, there needs to be discussion about the standards used, with recognition of differences in language, culture, and tradition. Procedures for Tribes to secure courtesy home studies were unclear but information was provided following the focus group. Tribal stakeholders generally liked the opportunity to engage in open discussion to improve service delivery for families. Additional efforts in this direction could be incorporated into the PIP.

Youth stakeholders reported that there is more abuse and neglect in foster care than people realize. Youth report that sometimes, caseworkers and others, Guardian ad Litem (GALs) and Youth Attorneys, providers, do not listen to children and youth who bring these issues forward. The youth stakeholders felt that children and youth in foster care are seen as having little credibility by responsible adult stakeholders. The PIP potentially could address the development of new procedures for youth to bring their concerns to PS managers.

Foster parents recommend that CYFD more closely monitor foster homes by conducting un-announced visits. They also noted the need for more bilingual workers to ensure appropriate and productive communication with Spanish speaking clients. Many foster parents believe they should have a bigger role and voice in all matters impacting the children they serve. They also stressed the importance of the role of the community and local providers in alerting the child welfare system when it seems as though there is an issue with a youth in a foster home.

### 3. Item-by-Item Evaluation

*Item 3. How effective is the child welfare system in providing services, when appropriate, to prevent removal of children from their homes?*

#### *a. What do policy and procedure require?*

CYFD policy requires that reasonable efforts be made to maintain the family unit and prevent the removal of a child from his/her home, as long as the child's safety is assured. When removal is necessary, CYFD makes reasonable efforts to reunify the child and to finalize the child's current permanency plan. Protection and the best interest of the child are of paramount concern, followed by the treatment needs of the family. Reasonable efforts to prevent a child's removal from home or to reunify the child and family are not required if CYFD obtains a judicial determination that such efforts are not required. Courts are required to make findings on whether such reasonable efforts have been made.

CYFD policy also provides for in-home services to reduce the risk of maltreatment. Services are provided to the family on a voluntary basis, based on the assessment of needs and risks that take into account family strengths and family resources. CYFD develops and implements three types of plans for the provision of in-home services; a safety plan,

family assessment plan and family treatment plan. Contracted family support and family preservation services are available in some counties.

Per investigation policy, CYFD gathers the information required to determine the immediate safety and ongoing risks of harm to the child. CYFD completes the safety assessment, risk assessment and family strengths and needs assessments tools in all investigations. CYFD determines the disposition of the investigation, based upon the service delivery matrix that considers the assessment of the child's risk of future abuse and/or neglect, the needs and strengths of the family and the safety of the child. The safety of the child is the overriding concern throughout the casework relationship with the family. If the safety of the child is ever in conflict with the treatment or preservation of a family unit, the child's need for protection always takes precedence.

In practice, the SDM instrument is utilized, although there have been some issues regarding the comprehensiveness of the SDM. The SDM is actuarial in nature and not necessarily sensitive enough to identify whether risk has been addressed and appropriate changes have been made. In addition to the SDM, staffings are held with the Children's Court Attorneys prior to filing, and in Bernalillo County, Team Decision Making is in place. In other counties, there are pre-filing or pre-removal staffings. Medical and other professionals are called in to participate, as necessary.

*b. What do the data show?*

Data from Quality Assurance Reviews conducted in 2006 and 2005 show some decline in item strength. Provision of services to prevent removal was rated as a strength in 56% of the cases reviewed in 2006 and 67% in 2005. (Overall, Outcome Two was rated as 50% substantially achieved in 2006 and 51% in 2005; 15% partially achieved in 2006 and 17% in 2005; and 36% not achieved in 2006 and 32% in 2005.) The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items.

Data from a 2005 study of in-home services was reported in May 2006. An 11% random sample was selected (75 of the 679 in-home cases). Of those 75 cases, 24 (32%) had a subsequent report of abuse/neglect; and 28 children (13 families - 18%) entered foster care subsequent to a voluntary intervention.

It should be noted that the State is unable to isolate information in FACTS specifically to in-home services. (All voluntary cases, including adult protective services cases managed by another agency share the FACTS data base, and are in the same category of voluntary case.) The ability to compare the data from year to year is also affected by changes in the contract requirements and differences in how cases are reported in each Fiscal Year.

*c. Where was the child welfare system in Round One of the CFSR?*

In the first CFSR, New Mexico was found to be in substantial conformity with all of Safety Outcome 2. Ninety-one percent (91%) of the cases reviewed in New Mexico were rated as substantially achieved on this item (services to family to protect children in-home and prevent removal). This item was therefore not addressed in the PIP. The review team identified strengths in the way cases move quickly and successfully from the investigation phase to being opened for services, and in the provision of family preservation services (FPS) to families.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated in preventing removal?*

Item 3 was rated as a strength in the 2001 CFSR review (91%) and therefore was not part of the PIP. However, a number of other practices have been implemented or strengthened since Round One, including expanding voluntary services through the adoption of a new program model - In-Home Services. In addition, the State has secured a number of new investigation worker positions to manage its increasing caseload and has expanded the applicant pool by allowing persons with "related degrees" to be hired into these positions. In Bernalillo County and elsewhere, TDMs are held prior to filing and with multiple referral cases. These TDMs are considered an asset to the system. The State has also performed well, per the IV-E Audit, on obtaining "reasonable efforts" findings from the courts.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance on preventing removals?*

There has been an increase in investigation caseload and a corresponding increase in the number of children coming into custody. For example, in FY 2004, 1,085 children came into care and in FY 2005, there were 1,239 children that came into care. In fact, since Round One, there has been a 30% increase in caseload. This increase in case load appears to be attributable to both an increase in the number of children coming into care as well as a reduction in the number of children existing care.

The implementation of in-home services, especially family preservation, has changed to include voluntary services and the transition to a new model has been difficult in some counties. Full implementation has not yet been completed.

The Behavioral Health Purchasing Collaborative and Single Entity (ValueOptions New Mexico) have made changes to provider networks and the way that services are secured for families. The transition continues to be difficult. Some providers have been lost, due to changes in reimbursement practices. Overall, some services became more difficult to access.

Resources are insufficient to follow up with families referred for services after investigation. In addition, there is a relatively high poverty level and issues related to the incidence of substance abuse and domestic violence in the State contribute to repeat and/or chronic neglect. Resources to serve people are inadequate in many areas of the State, and typically there is not immediate access to effective treatment.

There is insufficient procedure developed for safety plan development and content. There are inadequate numbers of Spanish speaking workers and Spanish language materials.

***Item 4: How effective is the child welfare system in reducing the risk of harm to children, including those in foster care and those who receive services in their own home?***

*a. What do policy and procedure require?*

Risk assessment and safety management are comprehensively addressed in several areas of policy and procedure. The SDM tools are completed on all cases at investigation, prior to reunification, and prior to case closure. Monthly visitation is required with children in out-of-home placement to ensure safety, among other things. In-home Services require a safety plan, family assessment plan and family treatment plan. Permanency Planning services also include provisions for periodic risk and safety assessment and child-specific placement agreements are made at the time of placement.

When there is any concern about the safety of a child in foster care, there is always a response - either a safety assessment or CPS investigation. Intake procedures state that any allegation of abuse in a foster home with children in placement is assigned as an emergency priority. Further, investigation procedures require that safety reviews be conducted even when reports of abuse or neglect are screened out.

Visitation between parent and child are supervised initially to assess and manage risk for harm. With progress, this supervision decreases.

*b. What do the data show?*

Absence of Child Abuse and/or Neglect in Foster Care

The January 10, 2007 ACF Data Profile reports "absence of child abuse and/or neglect in foster care (12 months)." The standard is 99.68%. Based on the data profile dated February 26, 2007 New Mexico's rate was 99.41% for FFY 2004, 99.66% for FFY 2005, and 99.46% for the 12 month period ending March 31, 2006. Thus, New Mexico has not met the standard.

Data from the CYFD FACTS system for FY 2006 show a one-year absence rate of 99.35%. Twenty of the 30 county offices had rates of 99.68% or higher. Data for all counties were provided to the Statewide Assessment Team.

Data from Quality Assurance Reviews conducted in 2006 and 2005 show little change in item strength. Risk of harm was rated as a strength in 50% of the cases reviewed in 2006 and 51% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items.

#### Characteristics of Children Who Experience Maltreatment in Foster Care

In terms of the demographics of children who experience maltreatment in foster care, the FY 2006 data showed that there was little difference in the rates by gender, race or ethnicity. This is, in part, because the numbers are too small to detect significant differences. These data were provided to the Statewide Assessment Team.

The Quality Assurance Unit reviewed the 40 cases known to have been victims of maltreatment while in foster care during CY 2005. The intent of this review was to gather information and determine if there were predominant factors impacting the maltreatment in foster care and what those factors might be. This information was used to discuss practices that need to be implemented to reduce risk of harm in foster care and to discuss implications for use of relative foster care and the importance of child-worker visitation. The study found that 28 of the 40 victims (70%) were in relative foster homes. The study also found that 33 of the 39 victims (85%) did not have a documented home visit to the child in the three months prior to the report. Seventy-six percent did not have a documented home visit to the foster parents in the three months prior to the report. The children who were the victims of maltreatment in foster care were young (45% were five years and younger; 70% were 10 years and younger); predominantly white (65%) and Hispanic (55%); and somewhat over represented in terms of gender (55% were female). In 45% of these cases, there were two perpetrators. This information has already been used to provide the foundation for program enhancement.

There are some limitations to the data in that the State cannot compare previous reporting years with the current year. In Spring 2006, CYFD completed an NCANDS re-write of the program and data mapping of the victim – perpetrator relationship. Subsequent testing of data has indicated that there are still potential issues surrounding siblings and victims and duplicate person IDs in FACTS. It is New Mexico’s understanding, however, that ACF will re-run submitted data, so eventually the State should be able to compare rates across current and prior periods of performance.

#### Maltreatment by Parents While Child in Foster Care

In terms of the incidence of children in foster care maltreated by parents, safety data profile element XI of the ACF Data Profile shows a rate of 0.96% (39 of 4,058 children) in FFY 2004, 1.36% (59 of 4,353 children) in FFY 2005, and 0.75% (33 of 4,412 children) in the 12 month period ending March 31, 2006. However, this information needs to be cautiously considered, as New Mexico does not collect the precise date of the alleged incident as a data field. Therefore, a finding of maltreatment dated after a child’s entry into foster care may be associated with an incident that occurred prior to the child’s entry.

#### Child Fatalities as a Result of Maltreatment

In terms of the incidence of child fatalities due to maltreatment (regardless of identity of the perpetrator) in the State, there were 7 reported deaths in FFY 2005, and 6 reported deaths in the 12-month period ending March 31, 2006. In New Mexico there is a multi-agency child fatality review team coordinated through the Department of Health. The team consists of a number of sub-teams that conduct reviews and analysis of child fatalities, by type. CYFD participates on the child maltreatment sub-team. CYFD also conducts critical incident reviews. These reviews are coordinated through the Office of General Counsel.

#### *c. Where was the child welfare system in Round One of the CFSR?*

Item 4 was rated as a strength and was not addressed in the PIP. As discussed above, in the first CFSR, New Mexico was found to be in substantial conformity with all of Safety Outcome 2.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated in reducing risk of harm to children, including those in foster care and those who receive services in their own homes?*

The child welfare system is attempting to provide more support to relatives in their roles as foster parents. For example, in Rio Arriba County, relative foster parents meet in a facilitated support group. Training is being provided for Spanish speaking foster parents, and efforts are being made to hire more and better utilize existing Spanish speaking workers. The risk assessment process involves the SDM at various points in the life of the case so that safety issues are assessed continually. However, as discussed elsewhere, the SDM is an actuarial based instrument used to determine a risk level, but it is not comprehensive assessment.

CYFD is in the process of adopting the Structured Analysis Family Evaluation (SAFE) approach to home studies. SAFE was created in California in 1989 and revised in 2003 in response to concerns about variability and superficiality in the study of foster and adoptive parent applicants. New Mexico is participating in a Federal Adoption Opportunities Grant with several other states to continue the expansion of SAFE. Implementation of SAFE will assist CYFD in creating a uniform and comprehensive home study process, to ensure that the information gathered and assessed is relevant to good placement decision-making and ultimately further enhances positive outcomes for children. Training on the implementation of SAFE will began February, 2007 for CYFD placement staff and managers and community providers who will be writing and/or approving home studies. Once trained on SAFE, these workers will begin to use the home study with new applicants and to recertify existing foster/adoptive parents.

Worker visitations, case staffings, judicial reviews, GAL and Youth Attorney contacts, CASA contacts, and CRB reviews all provide a means to periodically ensure that children remain safe after they are placed in foster care. Level-of-care determinations also identify the child's needs, though there was concern raised that the Agency may not always adequately assess foster parents' capacity to meet those needs. The Agency also has a defined process for responding to concern regarding the safety of children in foster care.

CYFD is expanding utilization of access and visitation services in child welfare cases. Expansion provides both the additional capacity for visitation that is needed, given caseload increases, while also providing standardized application of visitation policies designed to manage risk of harm. CYFD has contracted to begin to provide training on visitation for agency staff and providers conducting visitation

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance reducing risk of harm to children, including those in foster care and those who receive services in their own homes?*

Again, the SDM is an actuarial based instrument used to determine a risk level, but it is not comprehensive. The child welfare system does not have a tool for assessing risk in out-of-home placement except for the SDM. However, worker visitations, case staffings, judicial reviews, GAL and Youth Attorney contacts, CASA contacts, and CRB reviews all provide a means to periodically ensure that children remain safe after they are placed in foster care.

There are also challenges in terms of the numbers of foster homes available for placing the increased number of children in custody, the lack of resources for services in many areas of the State, and worker turnover and vacancy rates.

The implementation of in-home services, especially family preservation, has changed to include voluntary services, and the transition to a new model has been difficult in some counties. Full implementation has not yet been completed. Procedures for the development and implementation of safety plans are not comprehensive and do not provide sufficient direction to staff.

**NOTE: The following county level statistical reports on safety are available:**

Distribution, by county of reports by acceptance, priority, substantiation (April 2005 – September 2006)

Distribution, by county of substantiated reports by allegation (April 2005 – September 2006)

Relative workload/caseload, by county – percentage of State (April 2005 – September 2006)

Absence of maltreatment recurrence, by county and by demographics (April 2005 – September 2006)

Absence of child abuse/neglect in foster care, by county and by demographics (April 2005 – Sept 2006)

## Permanency Outcomes

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

#### 1. Data Summary

The Statewide Assessment Team (SAT) reviewed the overall permanency composites as well as item-by-item data. New Mexico exceeds the standards for permanency composites two (timeliness of adoptions) and three (permanency for children and youth in foster care for long periods of time). New Mexico does not meet the standards for timeliness and permanency of reunification (composite one) or placement stability (composite four). Exploring these data, it was obvious that we are below the median on three of the four reunification time measures that make up composite one and all three placement measures that make up composite four. The SAT essentially concluded that there are a myriad of reasons for these performance measures, including resources within the Agency (caseloads, vacancies, turnover) and external to the Agency (service array, timing of court hearings, and availability of foster homes of sufficient variety).

New Mexico notes that ACF calculates the measures in Component A of Permanency Composite 1 and measure 1 in Permanency Composite 4 to exclude children who were in custody for less than 8 days. As a significant number of children are reunified in less than 8 days (over 40% of the children who enter care), Component A does not represent a complete picture of children's experiences in New Mexico.

Item 5 examines foster care re-entries. The ACF Data Profile showed that this is the one measure where New Mexico performance was better than the national median (though not at the 75<sup>th</sup> percentile). The national median is 15.0% and New Mexico is noted at 12.1% for the 12-month period ending March 31, 2006. Data derived from FACTS show 13.5% of children re-entering within 12 months of the prior episode. Information from the Quality Assurance data shows that foster care re-entry was noted as a strength 90% of the cases reviewed in 2006 and in 85% of the cases reviewed in 2005. This item was also a strength in Round One. From these data, it was concluded that permanency of reunification is less of an issue than timeliness.

Item 6 speaks to placement stability (as does composite 4) with data confirming that this is a challenge in New Mexico. Per the Profile, about 20% of the children experience three or more placements, and about 25% are in placements other than pre-adoptive, relative foster, and non-relative foster homes. FACTS data on this topic show a higher rate of children with three or more placements (35%) but these findings are based on all children in care, including those less than 8 days. They also show a higher rate of children pre-adoptive, relative foster, and non-relative foster homes (nearly 90%). FACTS data show that the average number of placements is 2.58. Quality Assurance data available for calendar years 2005 and 2006 show that this item was rated a strength in 49% of the cases reviewed. These data directed the SAT to recommend that New Mexico consider expanding the variety of placement options available, to consider options for emergency and other placement types, and to enhance recruitment efforts.

Item 7 relates to permanency goals and the available data speak to the distribution of types of goals. ACF data show that long term foster care goal rates decreased over the three time period reported on the data profile as did rates of emancipation goals. This is also reflected in permanency composite three where New Mexico met the standard for permanency for children and youth in foster care for long periods of time. FACTS data were also reviewed to show exits from foster care to reunification were accomplished in just over two thirds of the cases in the reporting period and almost 10% exited to adoption. The SAT did not have major issues with the use of the various goals.

Item 8 looks more deeply into reunification and permanent guardianship. Permanency Composite One speaks to this, as do FACTS data that show a better picture. The issue addresses how timely cases move through the system to reunification or guardianship where issues of resources within the agency (caseloads, vacancies, turnover) and external to the agency (service array, timing of court hearings, and availability of foster homes of sufficient variety) are of concern.

Item 9 addresses adoption, clearly a strength in New Mexico. The State exceeds the national standard, exceeds the 75<sup>th</sup> percentiles on 3 of the five measures making up that composite, and exceeds the median on the other two. FACTS data showed similar favorable statistics regarding time to adoption. Interestingly, these positive findings are not reflected in Quality Assurance studies that show adoption was rated a strength in 38% of the cases reviewed in 2006 and 50% in 2005. The SAT projects even more favorable findings in future monitoring as New Mexico moves deeper into open adoption and mediated contact agreements.

Item 10 is about Planned Permanent Living Arrangements and very little data were available to inform the practice of using PPLA. (ACF does however report that long term foster care goal rates decreased over the three years reported as did rates of emancipation goals.) Quality Assurance data in both 2005 and 2006 do not show the use of PPLA as a strength in the majority of cases. The SAT questioned whether the practice of PPLA was understood well enough; a Best Practices Bulletin may be in order.

## 2. Stakeholder Assessment

The SAT reviewed the extensive data available to inform this outcome and identified a number of concerns. These SAT maintain that parents need to be engaged much earlier in the process. Parents need to be informed as to what is expected of them from early on and periodically throughout the case. Effective family engagement, especially through facilitated and mediated processes, needs to be broadly promoted. Everyone's roles in promoting the success of the parent should be identified and understood. Early engagement would impact all CFSR outcomes and this could be addressed in the PIP.

SAT reported that there should be more frequent caseworker visits with biological parents. Workers should constantly engage parents in framing and revising the treatment plan and constantly check on progress and compliance with the treatment plan. Workers should try harder to accommodate parents' work schedules, limited transportation, and other needs. This could be looked at further in the on-site review or through training and other remedial efforts through the PIP.

Visitation between children and parents must be promoted, and the Best Practice Bulletin on the topic is an asset. The SAT noted that some parents barely show up to child/parent visits, while others are motivated and work really hard to follow visitation plans. Visitation guidelines need to be followed, and visitation must regularly occur before reunification. It must be clear that visitation is for the children and is not to be used as a reward or punishment for the parent.

Transition home plans should be the norm when reunification is the goal. The Best Practice Bulletin on this topic needs to be broadly promoted.

These issues need to be understood in the context of available resources and workload/caseload demands. The impact of a 30% increase in caseloads since Round One on this permanency outcome should be further explored in the on-site review.

SAT concur that children and families would benefit from more frequent court review and more intense oversight. Judges and attorneys could be calling/requesting status conferences. Courts need to insist that all assessments are done by the adjudication or initial judicial review. Judges need to emphasize the importance of following the treatment plan and clearly explain to parents what is expected of them. This should be taken to CIP or perhaps become the subject of a Best Practice Bulletin.

SAT affirmed repeatedly that services must be more broadly available. The availability of services varies tremendously from one geographic location to another within the State. The on-site review should examine how lack of services and/or access to services has impacted placement stability across all lengths of time in care and any differences in rural versus urban areas of the State.

SAT also recommended that there be more options for placement. They noted that finding the initial placement is often challenging, given that most of the children coming into care do so on a law enforcement emergency hold, and such children are unknown to the Agency. The initial placement is often based on available space and frequently ends up as temporary. New Mexico should consider using emergency placements/assessment homes. The child welfare system should actually expand and refine our recruitment to include several types of homes: Emergency, Concurrent, Relative, Longer-term, Respite, Treatment Foster Care, *etc.* The SAT would like to see this issue addressed in the PIP.

CYFD needs to provide children and youth with as much information as possible to explain the reason for their foster care placement. The Agency needs to provide an explanation of the temporary nature of the initial placement, especially for those children who come in on an emergency police hold; this could help identify alternative placement resources and/or minimize the trauma of a subsequent move.

The child welfare system has to work on making each placement as positive as possible and minimizing placement moves. Ice Breakers, done in Bernalillo County and elsewhere have shown promise. Ice Breakers are facilitated meetings between the child's parents and the foster care provider designed to share information about the child's routine, likes, and dislikes, and to provide the foundation for co-parenting between the parent and the foster parent.

Team Decision Making™, as implemented in accordance with the Casey trademark in Bernalillo County, is being used to prevent entry and re-entry into foster care and to promote placement stability. The on-site review should look at whether the Team Decision Making process can, in fact, effectively and positively impact permanency and stability outcomes for children.

SAT concur that open adoptions is a promising practice and should be promoted. Currently, the practice of open adoption varies statewide, and there may be a need to create more uniformity. Open adoptions mediation of the contact agreement is a positive aspect of the process. There could also be more resources for relinquishment counseling. SAT recommends more training for everyone in the system on open adoptions and mediated Contact Agreements. A Best Practices Bulletin should be produced for these purposes.

Judges are deeply concerned about re-entry, which they attribute primarily to substance abuse issues. They commented that ASFA time frames are short when respondents are dealing with methamphetamines and other substance abuse issues. Not only are typical treatment and recovery times longer than ASFA timeframes, but barriers are created by the inability to find services and quickly access them. Waiting lists are too long (three to four months in some places) and cutbacks in services are unacceptable. This is a major issue because so many children and youth come into care with substance abuse as a primary factor contributing to the abuse/neglect. Family Drug Courts have been helpful but now that TANF-supported treatment is not available, they have less impact. Substance abuse experts argue that 90 days or other time-limited substance abuse treatment is inadequate and that it takes 18 months to 2 years to be effective. While the Court is taking on larger roles in terms of setting expectations for parental compliance with treatment plans, being able to access treatment soon enough and long enough is out of the courts' control; this complex situation definitely hinders the Agency's efforts to assure permanency.

While the Judges support the idea that community-based treatment is preferable when appropriate, they are concerned that there are not enough community-based treatment resources. Courts are dealing with crisis situations that need an immediate response. Children and families cannot afford treatment failures in community-based settings. They are also concerned that child welfare system is not getting timely and quality assessments and as a result, we often overlook significant mental health needs.

Regarding the use of Planned Permanent Living Arrangement (PPLA), Judges noted that this must be linked with something concrete, like Semi-Independent Living. They want "real plans" and note that sometimes it seems like PPLA is established when CYFD cannot figure out what to do with a youth. In these instances, it is imperative to hear from the youth.

Judges, like the SAT, also felt that for some cases, there is too much time between hearings. Since Judges can dictate when hearings happen, they can use this authority to compel more frequent checks on the progress of a given case towards permanency. The idea of Benchmark Hearings to check on transition, as described in the Best Practice Bulletin, is appealing to Judges.

Another concern expressed by these Judges relates to a shortage of Respondent Attorneys, GALs, and Youth Attorneys in many areas of the State. They attribute the problem primarily to inadequate compensation and secondarily to insurance and liability issues. They recommend that more be done through the Administrative Office of the Courts and the CIP to increase compensation.

Judges recommend that GALs, Youth Attorneys, and CASAs have more input on placement decisions. They recommend that Team Decision Making and Best Interest Placement meetings include these attorneys and advocates. These persons are sometimes more consistent in the life of the child than caseworkers because of turnover in CYFD.

Tribal stakeholders prefer guardianship placements, due to cultural restrictions that often prevail regarding termination of parental rights. ASFA and IV-E funding do not take this into consideration. This is a cultural issue that deserves recognition, especially since New Mexico's IV-E Waiver allowing subsidized guardianship for Native American

children and youth has ended. In previous years, if a Native American child was in custody someone from the Tribe attended all staffings, hearings, meetings to represent and assist the family. That practice needs to be resurrected to ensure due process for parents, perhaps as a PIP strategy.

Participants in the Native American focus group felt that the CFSR On-Site Review Instrument lacks focus on ICWA issues and that all Tribes should get involved in pushing for change at the national level. They reported that this has been heretofore attempted, but they felt no changes to the instrument were made.

Youth would like to see a better way to match foster youth with foster placements, especially for older youth. A process should be developed to include youth meeting with prospective families prior to placement, so that they could "interview" one another.

Youth also suggested that placement TDMs need to happen with all placement decisions and need to always involve the young person. When there are difficulties in placements, the assumption is usually that the young person is misbehaving and the typical response is to move the youth. This does not teach problem solving; this does not recognize that all young people, foster or not, sometimes act up and act out.

Several youth noted that their current or former foster parents were well trained. These youth were aware of the training requirements and classes that the foster parents needed to take. Other youth did not have a favorable impression of foster parents. They report that many foster parents are "in it for the money," even though they know that foster care payments are low. They report that more foster parent training is needed. They also said that more foster homes should be recruited.

Several youth reported frequent contact with their workers as well as their dislike when workers change. Youth want to feel supported by their workers; they want them to be advocates for them.

Many youth reported that they participate in their case planning with their workers and their attorneys. Youth reported they attend Judicial Review hearings and other hearings related to their cases. Youth felt that the system could be made better if they were given more information about what was happening in their cases and what was happening with their parents.

Foster parents are concerned about their roles and relationships in the system. They believe they are underutilized and undervalued and should have more rights for the care of children in their homes.

More availability of respite care could dramatically impact placement changes. There should also be more support for foster parents who have problem children in their homes who are disruptive and causing family conflict. Without needed support many foster parents feel they have no choice but to ask to have these children moved. Factors impacting placement stability should be examined in the PIP.

Foster parents think that community behavioral health providers need to be better educated and experienced regarding the needs of children in the protective services system, the effects of child abuse and neglect on development, best treatment methods, *etc*; foster parents need to be engaged and involved in more community networking.

## 2. Item-by-Item and Composite Evaluation

### Permanency Composites

For Permanency Composite 1 - Timeliness and Permanency of Reunification, the National standard is 122.6 and New Mexico's score is 109.0, meaning New Mexico did not meet the standard. There are two components to this composite: Component A - Timeliness of Reunification; and Component B - Permanency of Reunification. The federal methodology used to calculate Permanency Composite 1 does not adequately represent reunification efforts in New Mexico, as children in foster care less than eight days have been excluded. In New Mexico approximately 44% of the children entering foster care are reunified in less than eight days. This is attributed to law enforcement having the ability to place children into foster care. Given the federal methodology used, a complete picture of New Mexico's child welfare efforts is not represented. The measures making up all of the components, along with the national medians and New Mexico scores, are found in the ACF data profile.

For Permanency Composite 2 - Timeliness of Adoptions, the National standard is 106.4 and New Mexico's score is 114.9, meaning New Mexico exceeds the standard. There are three components to this composite: Component A - Timeliness of Adoptions of Children Discharged from Foster Care; Component B - Progress Toward Adoption for Children in Foster Care for 17+ Months; and Component C - Progress Toward Adoption of Children who are Legally Free. The measures making up these components, along with the national medians and New Mexico scores, are found in the ACF data profile.

For Permanency Composite 3 - Permanency for Children and Youth in Foster Care for Long Periods of Time, the National standard is 121.7 and New Mexico's score is 122.9, meaning New Mexico exceeds the standard. There are two components to this composite: Component A - Achieving Permanency; and Component B - Growing Up in Foster Care. The measures making up these components, along with the national medians and New Mexico scores, are found in the ACF data profile.

For Permanency Composite 4 - Placement Stability, the National standard is 101.5 and New Mexico's score is 82.9, meaning New Mexico did not meet the standard. There are no sub-components to this composite. The measures making up this composite apply to all children in care for at least 8 days, by CFSR definition. The national medians and New Mexico scores are found in the ACF data profile.

Data on the various measures that make up these components and composites for counties were provided to the Statewide Assessment Team. Data on overall child counts, foster care counts, and adoption counts were also provided as were point-in-time data (July 2006) on children in foster care by gender, age, and ethnicity.

***Item 5. How effective is the child welfare system in preventing multiple entries of children into foster care?***

***a. What do policy and procedure require?***

Permanency Planning Policy and procedures identify the activities CYFD will carry out to ensure that children have a safe and permanent placement. Specifically:

- CYFD is required to develop and update assessment and treatment plans describing services to be offered to prevent removal or to reunify the family.
- CYFD provides or arranges for services to "effect the changes necessary to reunify the family," utilize safety and risk assessments and reassessments to determine the need for continued services, and involve the parent(s) in developing individualized treatment plans and requires monthly face-to-face contact with both parents.
- CYFD arranges for visitation between the child and his/her parents and includes trial home visits.

***b. What do the data show?***

ACF Data Profile (Composite 1, Component B, Measure C1-4) includes information on re-entry. The measure is "of all children discharged from foster care to reunification in the 12-month period prior to the one shown, what percent re-entered foster care in less than 12 months from the date of discharge?" The national median is 15.0% and New Mexico is noted at 12.1% for the 12 month period ending March 31, 2006; 9.6% for FFY 2005; and 13.1% for FFY 2004.

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 2104 cases and show 82.6% of children entering care for the first time; 13.5% re-entering within 12 months of the prior episode; and 3.8% re-entering more than 12 months after prior episode. These data are broken down by county, gender, race, and ethnicity in tables provided to the SAT.

Quality Assurance data available for calendar years 2006 and 2005 show some improvement in item strength. Foster care re-entry was noted as a strength in 90% of the cases reviewed in 2006 and in 85% of the cases reviewed in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items. (Overall, Permanency Outcome One was rated as 48% substantially achieved in 2006 and 50% in 2005; 51% partially achieved in 2006 and 46% in 2005; and 1% not achieved in 2006 and 4% in 2005.)

***c. Where was the child welfare system in Round One of the CFSR?***

New Mexico's foster care re-entry rate (within 12 months of a prior foster care episode) was 7.2% (national standard was 8.6%). Foster care re-entries were also determined a strength in the onsite review process (100%), and in stakeholder interviews. Concerns were about children returned home who re-enter foster care later, due to their parent's substance abuse. Concern about substance abuse issues were noted as a common problem across the State, as were service disruptions when children are reunified.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

CYFD has conducted staff training related to re-entry as well as developed visitation practice standards. Team Decision Making meetings are held prior to returning a child home, and there is use of trial home visitation and transition home plans. There is more involvement of foster parents, and there are several access and visitation programs. In Bernalillo County, there are six-month aftercare plans, and in all counties, there are safety plans. In some counties, there are domestic violence advocates, wrap-around services, mediated open adoptions, and in-home services.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

Substance abuse by parents continues to be viewed as a significant barrier. Persistent poverty and limited financial assistance are also confounding factors. With increasing caseloads, vacancies, and turnover, there is a need for more permanency workers. Also, there are limited resources for families in many areas of the State, especially substance abuse treatment, including aftercare. Some people maintain that ASFA timelines are somewhat inconsistent with the time needed for substance abuse treatment and recovery. On a related note, there is some difference of opinion within the child welfare system about the necessity of abstinence versus harm reduction. Finally, there is some concern that insufficient post-adoption services contribute to re-entries.

***Item 6. How effective is the child welfare system in providing placement stability for children in foster care (that is, minimizing placement changes)?***

*a. What do policy and procedure require?*

Protective Services policy and procedures address placement stability in at least three areas: Permanency Planning, Adoption Services, and Foster Parenting. In terms of Permanency Planning:

- CYFD is required to consider the child's best interests in assessing placement options for that child.
- CYFD provides a variety of placement types to meet the child's unique needs.
- Procedures detail the information to be provided to the child, the child's family, and the placement provider in preparing for placements and requires that the worker provide services to the child and foster parent to help maintain the child's placement.

Adoption Services Policy and related procedures support stability in adoptive placements by:

- providing for adoption subsidies for eligible children;
- spelling out requirements for pre-placement studies, including orientation and training, background checks, references, and home visits;
- specifying that the best interest of the child is the most important factor in identifying an adoptive family;
- identifying requirements for full disclosure of information to adoptive families;
- providing for post-placement services through finalization of the adoption;
- developing and implementing a crisis intervention plan to prevent disruption; and
- providing for post-decree services, including mental health and in-home services, to maintain the family unit.

Foster Parenting Policy spells out requirements for foster parents and relative foster parents and further supports placement stability by:

- monitoring and supporting licensed foster homes, including providing necessary information to the foster parent and conducting home visits at least every six months; and
- clarifying the roles and responsibilities of foster parent.

CYFD Licensing Standards for Foster Care provide detail about studying and licensing foster care providers and lists, the rights of foster care providers, including the right to certain minimal information about the child and his/her family.

*b. What do the data show?*

The ACF Data Profile provides data in Permanency Composite 4 - Placement Stability. As presented above, the National standard is 101.5 and New Mexico's score is 82.9, meaning New Mexico did not meet the standard. The measures making up this composite apply to all children in care for at least 8 days by CFSR definition and can be found in the Profile.

The ACF Data Profile also provides data on number of placements per current episode for children entering care for the first time. Three data sets are available, showing the percentage of youth with two or fewer placements as 80.5% in FFY 2004, 85.5% in FFY 2005, and 83.5% in the year ending on March 31, 2006. The point in time permanency profile shows that the percentage of youth with two or fewer placements was 51.7% in FFY 2004, 55.5% in FFY 2005, and 56.2% in the year ending March 31, 2006. The point in time permanency profile also highlights that approximately 20% of the youth had experienced 5 or more placements. This suggests that there is a special population of youth with highly specified needs around placement stability. Only further research into this area can inform practice change required to reduce placement changes and/or provide for earlier identification of these youth so as to prevent placement changes.

The ACF Data Profile also provides data on most recent placement type for three federal fiscal years. (It must be noted that figures for trial home visitation and runaway are being corrected in the data system.) For FFY 2004, 2005, and for the 12 months ending March 31, 2006, the percentages of children aggregated across pre-adoptive, relative foster, and non-relative foster homes are respectively 74.7%, 75.8%, and 76.5%. The respective percentages over these three years in group homes are 12.1%, 10.0%, and 8.0%. The respective percentages over these three years in institutions are 3.9%, 7.9%, and 8.3%. While family type placements have remained relatively consistent over the years, there has been a shift in congregate care placements, which potentially represents a greater need for more intensive psychiatric services. (Noting that institutional placements are primarily residential treatment center and psychiatric hospitals)

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 4,641 cases and show that 65.3% of the children in custody have two or fewer placements and that 34.7% have three or more. These data refer to all children in care (out of home placement), including those that were in care 48 hours through 7 days. These data, broken down by county, gender, race, and ethnicity, were provided to the SAT.

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 2,540 cases age 12 years or younger and show the type of the most recent placement. Overall, 57.0% are non-relative foster home; 20.3% are relative foster home; 12.0% are pre-adoptive family; 6.1% are institution; and 4.1% are group home. These data, broken down by county, gender, race, and ethnicity, were provided to the SAT.

FACTS data (Report 0904) for April 1, 2005 through September 30, 2006 include 5,411 cases and provide data on the number of months in out-of-home placement, months in current placement, and overall number of placements. These data show that the average number of months in out-of-home placement is 15.37; the average number of months in current placement is 5.51 months; and the average number of placements is 2.58. These data, broken down by county, were presented to the SAT.

Quality Assurance data available for calendar years 2006 and 2005 show identical item strength. Stability of foster care placement was rated a strength in 49% of the cases reviewed in both years. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items.

Citizen Review Board (CRB) data (FY 2006) show that of the 2,055 children reviewed in FY 2006, 49% had 1-2 placements; 33% had 3-5 placements; 9% had 6-8 placements, and 8% had more than 9 placements. These data will be

available from CRB on a county basis in their 2007 Annual Report. CRB reviews only those cases that have been in custody approximately nine months, i.e., those that are scheduled for a permanency hearing.

*c. Where was the child welfare system in Round One of the CFSR?*

In Round One, 88% of children who had been in care less than 12 months had no more than two placements (the national standard was 86.7%). Stability was also rated as a strength in 86% of the on-site cases. Stakeholders said New Mexico is appropriately matching children with families and that CYFD was successfully using kinship care and relative placements. There was evidence of strongly committed foster and adoptive parents, as well as caseworkers. Needs related to the use of shelters and availability of placement resources.

Round Two data are measured differently. Only those cases in care 8 days or more are now counted. In addition, in Round One, placement with a Treatment Foster Care agency counted once even if there was more than one home. In Round Two, each home is a distinct placement.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

CYFD has continued to expand and improve its recruitment, training, studying, development, and support of foster homes. CYFD is providing additional support whenever possible to maintain placements that might disrupt. Foster parents are more extensively involved in reunification efforts. There is somewhat more respite care available. Team Decision Making meetings are held with placement changes,; and Ice Breakers are being used with foster parents and birth parents. Closing a congregate care facility in Bernalillo county has reduced child welfare reliance on shelter placement.

Concurrent planning is a strength, as are home visits. Foster parent liaisons are increasingly engaged, and quarterly meetings are being held with foster parents. Some foster parent liaisons are visiting every placement then meeting with placement workers weekly to discuss supports foster parents might need. There is now a checklist of questions they can ask. In some areas, there are foster parent support groups and associations, and weekly meetings with placement services (often treatment and placement staff are visiting with foster parents together). Finally, there are staffings in some areas when a child comes into custody, to discuss placement (often called the pre-filing staffing or pre-removal staffing).

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

There are fewer foster homes for youth in care; the number of homes has stayed flat, while the number of youth in need of a home has grown. There is a lack of a service array to support foster parents, especially in some areas of the State. There is not enough respite services available to meet demand.

There needs to be a higher level of training for foster parents, especially around the behavioral problems of children. Foster parents require supports to be more effective in addressing the needs of foster children. Relatives providing placement services need specialized training. Some people maintain that it is too easy for foster parents to give children back, and there is a need for more accountability, maybe even a "code of professional responsibility" and "code of ethics."

***Item 7. How effective is the child welfare system in determining the appropriate permanency goals for children on a timely basis when they enter foster care?***

*a. What do policy and procedure require?*

Protective Services Permanency Planning policy and procedures address the timely identification of appropriate permanency goals.

- Policy identifies five allowable permanency plans (reunification, adoption, permanent guardianship, placement with a fit and willing relative, and planned permanent living arrangement) and requires that a plan be established for each child at the Assessment Planning Conference which is held prior to the custody (10-day) hearing.
- CYFD is required to assess the child's permanency plan for appropriateness at every CYFD conference, staffing, and judicial review and prior to every permanency hearing. CYFD must file a motion to terminate parental rights and establish a new or modified permanency plan if a child has been in substitute care for 15 of the most recent 22 months, unless there are compelling reasons for not filing.
- Policy requires that each child be assessed for a concurrent permanency plan within 30 days of entry into custody and that a concurrent plan be developed when indicated.
- CYFD is required to make reasonable efforts to prevent the removal of a child from his/her home and to return the child home as long as the child's safety is assured, and CYFD must make and finalize alternative permanency plans in a timely manner when reunification is not appropriate.
- Policy requires that a permanency hearing be held for each child within six months of the initial judicial review or twelve months of the child's entry into custody. At this hearing, a determination is made as to whether the child should return home or another permanency plan be established.

*b. What do the data show?*

The ACF Data Profile provides information on permanency goals for children in care for FFY 2004, 2005, and the 12 months ending March 31, 2006. Reunification goals were found in 52.5%, 56.4%, and 54.4% of the cases respectively over these three years. Adoption goals were found in 26.9%, 28.7%, and 30.0% of the cases respectively over these three years. Long term foster care goal rates decreased over three years: 4.6%, 3.0%, and 1.1%, as did emancipation goals: 7.0%, 4.9%, and 5.9%.

The ACF Data Profile provides information on reasons for discharge (first time entry cohort) for FFY 2004, 2005, and the 12 months ending March 31, 2006. Discharge to reunification/relative placement rates are 93.5%, 93.4%, and 94.9%. Median lengths of stay in foster care are decreasing. For these three years and this cohort, they are: 3.2 months, 2.7 months, and 2.7 months.

The ACF Data Profile Permanency Composite 3 relates to Permanency for Children and Youth in Foster Care for Long Periods of Time. The National standard is 121.7 and New Mexico's score is 122.9. There are two components to this composite: Component A - Achieving Permanency; and Component B - Growing Up in Foster Care. The measures making up these components, along with the national medians and New Mexico scores, are found in the ACF Data Profile.

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 1,560 cases and show exits from foster care overall as 67.1% reunification; 9.4% adoption; 8.8% emancipation; 5.4% guardianship; 4.0% other relatives; 3.3% another agency; 1.9% "other;" and 0.2% death of child. This report excludes children on runaway and trial home visitation status whose placement ended in a prior reporting period; the figures for reunification and emancipation are thus somewhat under-reported. These data, broken down by county, gender, race, and ethnicity, were provided to the SAT.

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 114 cases and show exits from foster care for children with disabilities as 53.5% reunification; 15.8% emancipation; 13.2% adoption; 8.8% guardianship; 3.5% other relatives; 2.6% "other;" 1.8% another agency; and 0.9% death. This report excludes children on runaway and trial home visitation status whose placement ended in a prior reporting period; the figures for reunification and emancipation are thus somewhat under-reported. These data, broken down by county, gender, race, and ethnicity, were provided to the SAT.

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 531 cases and show exits from foster care for children who were 12 years or older at entry as 52.5% reunification; 26.0% emancipation; 5.6% adoption; 5.6% guardianship; 5.6% "other;" 2.3% another agency; 2.1% other relatives; and 0.2% death. This report excludes children on runaway and trial home visitation status whose placement ended in a prior reporting period; the figures for

reunification and emancipation are thus somewhat under-reported. These data, broken down by county, gender, race, and ethnicity, were provided to the SAT.

Quality Assurance data available for calendar years 2006 and 2005 show a slight increase in item strength. Permanency goal for the child was rated a strength in 88% of the cases reviewed in 2006 and in 84% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items.

Citizen Review Board (CRB) data (FY 2006) show that of the 2,055 children reviewed in FY 2006, 47% had a goal of reunification; 39% had a goal of adoption; 10% had a goal of planned permanent living arrangement; 3% had a goal of permanent guardianship; and 1% had a goal of placement with a relative. CRB reviews only those cases that have been in custody approximately nine months, i.e., those that are scheduled for a permanency hearing.

*c. Where was the child welfare system in Round One of the CFSR?*

Per the final report, “NM’s data indicate that most children who enter foster care achieve permanency in a timely manner. All children in NM who are in foster care have a written permanency goal. NM’s State data indicate that 48% of all children who enter care through the law enforcement “48 hour hold” policy return to their families within 5 days. Of children who remain in care more than 5 days, 86.3% are reunified with their families within 12 months. This meets the national standard of 76.2% or more for length of time to reunification.” However, based on information obtained during the onsite review process, this item was rated a strength in 79% of the applicable cases. Therefore it was area needing improvement.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

Through supervisory and other review processes, treatment plans are being more closely reviewed in terms of their fit with the permanency goals. In addition, visitation guidelines and training have taken place. Concurrent planning has been implemented statewide, permanency plans are set early in the case, and the court reviews and approves these plans. The Adoption and Adolescent Review Teams are reviewing the cases of children with Adoption Plans and all plans for older youth. Best Practice Bulletins on Advance Calendaring, Special Calendaring, and Pacing Permanency are designed to ensure that events impacting permanency take place on a timely basis.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system’s overall performance?*

Completion of the IV-E waiver and loss of the option of subsidized guardianship is considered a major barrier. The lack of adequate post-adoption services is a problem, as is the general lack of service array particularly in some areas of the State. Caseloads, staff turnover, and vacancies are challenges as well.

Other major issues are delays in completing adjudications and delays in terminating parental rights. With the adjudication, there are too many instances of “commence and continue.” Other problems relate to the lack of court orders for treatment plans. There is some perception that some judges do not always hold GALs accountable. Occasionally when there is a criminal case, there may be a “no contact orders” issued by the courts, which prevents visitation.

***Item 8. How effective is the child welfare system in helping children in foster care return safely to their families when appropriate through reunification, and permanent guardianship?***

*a. What do policy and procedure require?*

Several Protective Services policies and procedures address returning children home through reunification, permanency guardianship, or placement with a fit and willing relative.

- CYFD is required to make reasonable efforts to prevent the removal of a child from his/her home and to return the child home as long as the child's safety is assured.
- A permanency hearing is required for each child within six months of the initial judicial review or twelve months of the child's entry into custody. At this hearing, a determination is made as to whether the child should return home or another permanency plan be established.
- Reunification and placement with relatives is addressed in several sections of agency policy and procedures as follows:
  - Reunification is identified as one of the five allowable plans and a goal of reunification is initially the plan of choice, when appropriate.
  - Placement with a relative is a first consideration when substitute care is required. In addition, placements must be in close proximity to the child's home and maintain sibling relationships, as appropriate.
  - CYFD provide or arrange for services to "effect the changes necessary to reunify the family," utilize safety and risk assessments and reassessments to determine the need for continued services, and involve the parent(s) in developing individualized treatment plans. In addition, this section requires monthly face-to-face contact with both parents.
  - CYFD arrange for visitation between the child and his/her parents and includes trial home visits.
- Foster parents are required to work with CYFD and the child's parent, custodian, or guardian in order to carry out the plan for the child, including returning the child to his/her parent or guardian or placement with relatives.

*b. What do the data show?*

The ACF Data Profile in Permanency Composite 1 (Timeliness and Permanency of Reunification) shows the National standard at 122.6 and New Mexico's score at 109.0, meaning New Mexico did not meet the standard. There are two components to this composite: Component A - Timeliness of Reunification; and Component B - Permanency of Reunification. The measures making up these components, along with the national medians and New Mexico scores, are found in the Profile.

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 1,046 cases of children in care for 48 hours or longer. The report shows time to reunification as 87.3% in less than 12 months; 4.5% in at least 12 months but less than 24; 3.1% in at least 24 months but less than 36; 0.6% in at least 36 months but less than 48; and 4.6% 48 months or more. These data, broken down by county, gender, race, and ethnicity, were provided to the SAT.

Quality Assurance data available for calendar years 2006 and 2005 show an increase in item strength. Reunification, guardianship, or permanent placement with relatives was rated a strength in 70% of the cases reviewed in 2006 and 62% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

New Mexico participated in Round One of the CFSR prior to changes in the on-site instrument, when Item 8 addressed Independent Living Services. Thus an item-to-item comparison is not available. However, the ACF Data Profile contains information on Round One measures to allow for states to make performance comparisons. In Round One, the state must have had 76.2% of the children reunified within 12 months of entry to meet the standard. New Mexico has consistently exceeded that standard, however performance has decreased from FFY 2004 (89.5%) to the 12 month period ending March 31, 2006 (81.1%) This factor could be contributing to the increase in the number of children in care that has been witnessed in New Mexico over the years.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

The general consensus is that the child welfare system does a decent job of returning children and youth home. Much of this effort, however, is not reflected in the composite measure, as these activities occur in less than eight days. Some of

the assets that have enhanced the system since the last review include Team Decision Making, Family Group Decision Making, Mediation, and Family Drug Court. A Best Practice Bulletin has been published on Trial Home Plans.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

The issue of commencing and continuing the adjudication is problematic, as it means the child welfare system cannot move as assertively as it otherwise could. Workers still engage with parents and establish relationships. Another barrier is that service providers too often express that they do not support reunification. There is also a need for more training in family therapy for service providers.

**Item 9. How effective is the child welfare system in achieving timely adoption when that is appropriate for a child?**

*a. What do policy and procedure require?*

Protective Services Legal Services Policy, Permanency Planning Policy, and Adoption Services Policy, and the related procedures all address the timely and appropriate adoption of children in custody. For example policy/procedures identify:

- Process for the assessment of the appropriateness of the child's permanency plan at every CYFD conference, staff and judicial review.
- Requirement to assess each child within 30 days of entry into care for the appropriateness and establishment of a concurrent plan.
- Circumstances and time frames for filing for termination of parental rights (TPR), including the requirement that a TPR petition be filed when a child has been in foster care for 15 of the previous 22 months.
- Process for the relinquishment of parental rights.
- Process to file for Special Immigrant Juvenile Status for children in custody who have a permanency plan of adoption when it is not in the child's best interests to be returned to his/her country of origin.
- Requirement that a permanency hearing be held for each child within six months of the initial judicial review or twelve months of the child's entry into custody, to determine whether the child should return home or another permanency plan be established.
- Process for the Adolescent and Adoption Resource Team review the cases of all children with plans of adoption when that goal has not been achieved for 12 months or more, as well as children whose adoptive placements have disrupted or not been finalized within 12 months of the placement agreement.
- Process for CYFD to facilitate the negotiation of open adoption agreements, when appropriate.
- Procedures to support stability in adoptive placements.

*b. What do the data show?*

For Permanency Composite 2 - Timeliness of Adoptions, the National standard is 106.4 and New Mexico's score is 114.9, meaning New Mexico exceeds the standard. There are three components to this composite: Component A - Timeliness of Adoptions of Children Discharged from Foster Care; Component B - Progress Toward Adoption for Children in Foster Care for 17+ Months; and Component C - Progress Toward Adoption of Children who are Legally Free. The measures making up these components, along with the national medians and New Mexico scores, are found in the Profile.

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 146 cases and show time to adoption as 4.1% in less than 12 months; 20.5% in at least 12 months but less than 24; 27.4% in at least 24 months but less than 36; 23.3% in at least 36 months but less than 48; and 24.7% 48 months or more. These data, broken down by county, gender, race, and ethnicity, were provided to the SAT.

FACTS data (Report 0907) for September 1, 2005 through August 31, 2006 include 75 cases and show time to adoption for children age 3 or older at entry as 5.3% in less than 12 months; 17.3% in at least 12 months but less than 24; 22.7% in at least 24 months but less than 36; 18.7% in at least 36 months but less than 48; and 36.0% 48 months or more. These data, broken down by county, gender, race, and ethnicity, were provided to the SAT.

Quality Assurance data available for calendar years 2006 and 2005 show a decrease in item strength. Adoption was rated a strength in 38% of the cases reviewed in 2006 and 50% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases and adopted the new federal review instrument standard that considered whether timeliness was an issue in those cases where an adoption was finalized within 24 months. Variable numbers of cases are “not applicable” on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

This was an area needing improvement, based on Statewide aggregate data which showed that 28.4% of the children in New Mexico had finalized adoptions within 24 months (the national standard was 32.0% or more). Information was obtained during the onsite review process through the review of 13 applicable case records and stakeholder interviews. This item was rated a strength in 100% of the applicable cases. Strengths noted from case reviews and interviews included matching practices, early permanency goal setting, timely TPR, and adoption promotion campaigns.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

Assets developed and strengthened since the first review include concurrent planning; relative placements; best interest placements that include families early on; promotion of foster parent adoption; and the Adoption and Adolescent Review Teams (AART). In addition, there are adoption consultants, better definitions of levels of care and corresponding subsidies. There are siblings placed together for adoption even when siblings had been placed separately in foster care. The Heart Gallery is a definite asset as are new recruitment campaigns. Promotion of Open Adoptions through CIP Booklets, training, and other mechanisms have been taking place since Round One.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

There are not enough families for older children and those with special needs. There are many TPR cases being appealed. There is a perception that the fast appellate track is not being used. There are not enough post-adoption services, though renewed efforts have been launched; and there is lack of service providers knowledgeable about adoption.

***Item 10. How effective is the child welfare system in establishing Planned Permanent Living Arrangements for children in foster care who do not have the goal of reunification, adoption, guardianship, or permanent placement with relatives, and providing services consistent with the goal?***

*a. What do policy and procedure require?*

A plan of Planned Permanent Living is only allowable when the court determines this is the most appropriate plan after reunification, placement with a fit and willing relative, adoption, and permanent guardianship have been considered and ruled out. Procedures also requires:

- the treatment worker review the plan and counsel the child with a PPLA plan regularly, to determine if the plan is still in the child's best interest, and
- the AART reviews and approves PPLA plans for children under age 16 and for children whose plans are changing from adoption.

The Children's Court Attorney is required to provide the court with documentation of the compelling reasons for establishing a PPLA plan for a child.

Independent living services are provided to all children with PPLA plans in order to help them successfully transition into adult living. These services include, but are not limited to, transitional living planning, case management services, and semi-independent living status.

*b. What do the data show?*

ACF Data Profile contains information about the experience of children emancipating from the foster care system. While this data does not specifically address PPLA, it does inform the discussion. Approximately 7.9% of the children who emancipated from the foster care system in the 12-month period ending March 31, 2006 did so after being legally freed for adoption. This suggests that the child welfare system was not successful in locating adoptive families for these children. This is an increase from FFY 2004 and 2005 and more than twice the national median. New Mexico's performance in terms of children growing up in foster care has improved since FFY 2004. However, a greater number of youth in New Mexico were in foster care for three years or more prior to their 18<sup>th</sup> birthday than the national median

Quality Assurance data available for calendar years 2006 and 2005 show a decrease in item strength. PPLA was rated a strength in 25% of the cases reviewed in 2006 and 36% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items.

Citizen Review Board (CRB) data (FY 2006) show that of the 2,055 children reviewed in FY 2006, 47% had a goal of reunification; 39% had a goal of adoption; 10% had a goal of planned permanent living arrangement; 3% had a goal of permanent guardianship; and 1% had a goal of placement with a relative. CRB reviews only those cases that have been in custody approximately nine months, i.e., those that are scheduled for a permanency hearing.

*c. Where was the child welfare system in Round One of the CFSR?*

This was determined to be a strength based on information obtained during the onsite review (this item was rated a strength in all three of the applicable cases) and on information derived from stakeholder interviews.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

Approximately three years ago, the agency changed practice to ensure PPLA was established on in appropriate cases. As part of that effort, the Adolescent and Adoption Review Team reviews a case before establishing a PPLA plan for any youth under the age of sixteen. New Mexico provides for semi-independent living for appropriate youth who are at least sixteen year of age. Semi-independent living allows youth to be a venter, receive foster care maintenance payments and live with limited supervision to support transition into adulthood. Some areas of the state are able to use specialized caseloads where one person carries independent living cases to increase expertise and contact with youth. There is also a new emphasis on youth services – a separate bureau and additional staffing and efforts to increase the voice of youth in not only their own case planning, but in state policy, procedures and program development. There are several transition task forces and groups addressing the 18-21 year and transition issues. It is anticipated that new policy, procedure, and statute change will be pursued in late 2007. Staff have also increased efforts to work with youth around issues related to biological family relationships, when they know that youth are wanting to go home once they emancipate. The Best Practice Bulletin on Benchmark Hearings has been published as has a Best Practices Bulletin on Education Advocacy. This document has considerable focus on older youth.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

Challenges continue around the establishment of planned permanent living arrangement as an appropriate plan, and CYFD expects full implementation of planning efforts to secure permanent connections and support for youth people. Opportunities are needed for independent living. There needs to be new service systems and court structures. Also with the youth attorney assigned at 14 years, the youth's expressed preferences are sometimes not to be adopted. Better understanding of and better efforts need to be made to support youth on runaway status.

**B. Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.**

## 1. Data Summary

Because this outcome addresses a wide range of efforts that might be taken to preserve family and other connections for young people, the available data are largely quantitative and derive from Quality Assurance studies in 2005 and 2006. These studies yield mixed results. Proximity of placement (Item 11) was rated a strength in 86% of the cases reviewed in 2006 and 84% in 2005. Placement with siblings (Item 12) was rated a strength in 78% of the cases reviewed in 2006 and 86% in 2005. Visiting with parents and siblings in foster care (Item 13) was rated a strength in 43% of the cases reviewed in 2006 and 2005. Preserving connections in the community (Item 14) was rated a strength in 63% of the cases reviewed in 2006 and 68% in 2005. Relative placement (Item 15) was rated a strength in 65% of the cases reviewed in 2006 and 2005. Relationship of child in care with parents (Item 16) was rated a strength in 41% of the cases reviewed in 2006 and 52% in 2005. The Team noted the need to strengthen efforts in this area and pointed to a number of relatively new and promising practices such as TDMs, Ice Breakers, Open Adoptions, and mediated Contact Agreements. They also noted the challenges created by caseload increases.

## 2. Stakeholder Assessment

In reviewing Quality Assurance data and other information about this outcome, the SAT noted a number of limits to our ability to preserve connections. There are limitations, for example, when the perpetrator remains in the home, or when there needs to be safety restrictions on contact or even placement with extended family. Placement and distances are major factors in our ability to preserve connections. There are also foster parent issues in maintaining connections – some foster parents are unwilling or unable to transport foster youth; some have space issues limiting siblings being together. Most children need a wide array of services, and this invariably presents challenges to foster parents to manage complicated time and transportation schedules. Also, incarceration of a parent impacts the ability to preserve connections, especially for those parents in county jails. The 30% increase in caseloads since Round One without a corresponding increase in agency resources negatively impacts this permanency outcome. There does appear to be differences between maternal and paternal factors in terms of achieving this outcome, with better maternal results..

In terms of siblings, respite services provide an opportunity for siblings to spend weekends or other time together, should they be placed separately in foster care.

TDMs and Ice Breakers are believed to be assets in the process of preserving connections. There is a need to examine this in the on-site review to determine whether these processes can effectively and positively impact family relationships and preserving connections for children.

Services provided in the home such as Family Infant Toddler (FIT) programs are especially important and effective.

SAT expressed that visitation is an under-utilized resource in preserving connections and the continuity of family relationships. They also noted that moving to more flexibility in the timing and scheduling of visitation has been very positive. Access and visitation programs are an additional resource in some communities. Visitation physically connected to coaching, parenting classes, therapy, and other services is effective. Expanding these options might be addressed in the PIP.

In our efforts to preserve connections, we need to attend to culture (including Tribal matters), religion and faith, and numerous other parameters. We need education and awareness about each other. The on-site review might examine and identify culturally relevant services and approaches used to maintain connections

Participating Judges noted that mediation is working as a tool to preserve connections. In the 6<sup>th</sup> Judicial District, mediation takes place after petition and prior to the 10 day hearing and at every hearing thereafter. Participants agreed that mediation opens the decision-making process to other individuals who might not be invited or involved in actual hearings.

Proximity of foster care is an issue especially for children and youth in Treatment Foster Care or Residential Treatment. This often means that children and youth are sent out of county.

Judges noted that they are seeing a lot more open adoptions and like the concept and process. However, they noted that sometimes some of the players that should be involved in open adoption are not at the mediation. There is also a problem with adoptive parents who do not yet have attorneys; this is in part a funding problem, which is currently being

addressed by CYFD. There is clearly a need to train GALs, Youth Attorneys, and Respondent Attorneys about open adoptions.

Several Judges spoke about the need to work with incarcerated parents and the need to clarify our expectations and criteria for visitation with parents in jails or prisons. They noted issues of working with county jails who which are often not accommodating. Typically, State Correctional Facilities are more collaborative. One Judge questioned whether visitation in the prison/jail facility is a good thing, suggesting that it may not be. Overall, there is a need to look at all types of contact with incarcerated parents, not just face-to-face visitation. The Blue Ribbon Commission recently completed its work and participants suggested that as part of the PIP, we look at their report for possible guidelines.

Judges favorably acknowledged the expanded in-home visitation now taking place. They noted that it is clearly better than off-site visitation, although it is more costly.

Judges briefly discussed the question of youth coming to court as age-appropriate. Some Judges maintain that the system should embrace a standard that all children come to court so that the Judge can interact with them. Others noted that there are pros and cons to having the children in court – their presence is not always necessary; they might not understand what is happening; their presence disrupts school, *etc.*

Tribal stakeholders noted that District Judges make decisions on cases without regard to differences of language, culture, or traditions. The Courts operate differently across the State, and education and improved communication needs to be addressed.

Youth stated they were aware of efforts that the Agency makes to locate relatives for placement, and several talked about relatives that were explored for them. Some youth expressed that they felt it was important to the Agency to keep siblings together and that this is demonstrated in the work of the social workers. Nevertheless, youth felt that the system should do even more to keep siblings together and to keep youth connected to their families.

Foster parents believe they could have more of a role in preserving connections. They can assist in helping youth get involved in sports and extra curricular activities, so that they will not be moved and change schools sp often. They themselves can provide respite for youth previously placed with them. They can help maintain connections through positive reinforcement of biological connections, phone calls, visits, letters, religious beliefs, *etc.*

Foster parents are also concerned about relative placements. There is some belief that many relatives are not much different from the families the children come from and the Agency wastes a lot of time considering inappropriate relatives for child placement.

### 3. Item-by-Item Evaluation

*Item 11. How effective is the child welfare system in placing foster children close to their birth parents or their own communities or counties?*

#### *a. What do policy and procedure require?*

Permanency Planning Policy requires that CYFD place children in close proximity to their homes. When a child with a plan of reunification is not placed close to the child's home because of special needs, the worker must document why the placement is superior to other placements and facilitate visits.

#### *b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 show a slight increase in item strength. Proximity of foster care placement was rated a strength in 86% of the cases reviewed in 2006 and 84% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items. (Overall, Outcome Two was rated as 41% substantially achieved in 2006 and 42% in 2005; 50% partially achieved in 2006 and 54% in 2005; and 9% not achieved in 2006 and 4% in 2005.)

#### *c. Where was the child welfare system in Round One of the CFSR?*

Proximity of foster care placements was a strength based on information obtained from the Statewide assessment, citing policy and internal studies; during the onsite review process through the review of 29 applicable case records (rated a strength in 97% of the cases), and through stakeholder interviews.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

Efforts have expanded in terms of searching for relatives, and the overall concept of preserving connections has received a lot of attention since Round One. Genograms and other tools have proven to be effective. The Adolescent and Adoption Resource Teams review cases to encourage staff to identify and locate placement options for children in their own communities.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

If youth need a higher level of care, there is often no services in close proximity; in some counties, many children in regular foster care are out of county; behavioral health and physical needs and specialized care are not always in close proximity. CYFD is working through the Behavioral Health Purchasing Collaborative and with ValueOptions New Mexico, to expand options for community based-services. This allows children to remain in their communities.

**Item 12: How effective is the child welfare system in keeping brothers and sisters together in foster care?**

*a. What do policy and procedure require?*

Permanency Planning Policy and Procedures require that CYFD place children, so that an appropriate relationship with their siblings can be developed or maintained. When members of a sibling group have to be placed separately, the worker must document efforts to place them together and reasons they are placed separately. The worker must also document how contact between the siblings will be accomplished.

With any removal, CYFD considers the safety of the child(ren) as paramount, while simultaneously working to access placements that keep brothers and sisters together. Sometimes finding foster parents willing to accept large sibling groups is difficult, based on physical space issues or because they do not feel that they can deal with the special needs of multiple children. When it is not possible to place siblings together, the CYFD develops a visitation and communication plan that describes how contact among siblings will be accomplished. Frequency of visits or communication between siblings in the custody of CYFD is no less than once a week. The decision to place siblings separately is reviewed at each formal staffing event, to ensure on-going contact.

*b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 show a decrease in item strength. Placement with siblings was rated a strength in 78% of the cases reviewed in 2006 and 86% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. *c. Where was the child welfare system in Round One of the CFSR?*

This item was rated a strength, based on the Statewide assessment citing policy; on information obtained during the onsite review process through the review of 22 applicable case records (rated a strength in 100% of the cases); and on stakeholder interviews.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

New Mexico recognizes the importance of the sibling relationships and seeks to place siblings together. This is challenging for larger sibling groups (3 or more children) or when one or more of the children require specialized care. There are some innovations, however. For example, when there are larger sibling groups, they often do respite together; workers push visitation and phone calls, the use of the same child care provider, same therapist, etc. CYFD strives to

able to bring children back together in foster care or even in adoption if they are initially placed separately. The placement of siblings together is stressed by all recruiters. CYFD's quarterly "Fostering Connections" foster parent newsletter continually stresses the importance of keeping siblings together by reporting research as well as true-life stories. The importance of keeping siblings together is evidenced on the CYFD website, and the five recruiters routinely stress this as they reply to inquiries in their recruitment efforts. Recruitment events speak to the importance of keeping siblings together. Adoption consultants also address the importance of placing siblings together, as evidenced in adoption brochures, adoption columns that run in newspapers. Finally, the Heart Gallery features the importance of keeping siblings together in their recruitment efforts. Artists have beautifully recruited families for sibling groups.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

Despite Agency recruitment and retention efforts, finding foster parents who can accept large sibling groups because of space or resource issues is difficult. With the increase in the number of children in foster care, CYFD cannot "hold open" for large sibling groups a foster home that has the physical capacity. There are also insufficient community-based services to support foster parents, which might allow them to accept larger sibling groups. These services include respite and behavioral health services. The decision to place siblings separately is reviewed at each formal staffing event to ensure contact and to identify opportunities to reunite children who were initially placed separately from their siblings. Some times this presents a philosophical dilemma for the entire child welfare system when children have bonded to their placement providers and the benefits of continued placement with the current provider is weighed against reuniting siblings.

***Item 13: How effective is the child welfare system in planning and facilitating visitation between children in foster care and their parents and siblings placed separately in foster care?***

*a. What do policy and procedure require?*

Permanency Planning Policy requires that CYFD arrange for visitation between the child and the child's parents and between the child and the child's siblings, based upon the child's safety and best interests. A visitation plan must be created and documents when and where visits will take place. The plan should be progressive, moving from structured supervised visits to unsupervised visits, as appropriate. The worker assists the parents with transportation if necessary. Visitation should be arranged for incarcerated parents if possible, and the worker should facilitate visits between the child and other members of the child's family.

*b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 show identical item strength results. Visiting with parents and siblings in foster care was rated a strength in 43% of the cases reviewed in 2006 and 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

This was an area needing improvement, based on information obtained during the onsite review process through the review of 24 applicable case records (rated a strength in 79%) and stakeholder interviews.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

More diligent efforts are being made regarding parent and sibling visitation, to include involvement with incarcerated parents and special attention made to ensure father involvement/participation. Efforts are being made to ensure that visitation is progressive and expanded to sites beyond the county office. Visitation in foster parents' and parents' homes are promoted. Staff participated in visitation training to improve the effectiveness of visitation as a strategy in especially

reunification cases. There is a Best Practices Bulletin on Parent-Child Visitation and there are Access and Visitation programs in place in some areas. A Blue Ribbon Task Force is addressing the issue of visitation with incarcerated parents.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

There is a level of funding issue for Access and Visitation contractors. Some counties have limited space for visitation and some counties have no Client Service Agents to assist with transportation. If parents are in treatment (especially substance abuse) they may be a physically distant from the child. Incarcerated parents pose a challenge. For example, only a few institutions allow physical contact, visiting hours are often on Sunday, and the State prison in Santa Fe requires a court order to allow visitation.

***Item 14: How effective is the child welfare system in preserving important connections for children in foster care, such as connections to neighborhood, community, faith, family, tribe, school, and friends?***

*a. What do policy and procedure require?*

Permanency Planning and Legal Services Policy requires that CYFD place children in close proximity to their homes, that relationships with siblings are encouraged and maintained, that Indian Child Welfare Act (ICWA) placements preferences are followed, and that the agency appropriately identify Indian children and notifying the tribe.

*b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 show a slight decrease in item strength. Preserving connections was rated a strength in 63% of the cases reviewed in 2006 and 68% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

Preserving connections was rated a strength based on information obtained during the onsite review process through the review of 29 applicable case records (rated a strength in 90% of the cases) and through stakeholder interviews.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

Preserving connections has been a high priority. It was the theme for the 2006 Children's Law Institute; and there is a Court Improvement Project booklet on the topic. Many county offices meet on an on-going basis with the tribes within their counties, to ensure that connections are preserved for children even if they live off-reservation. The focus on preserving connections has assisted staff in expanding their conceptual framework. In addition to compliance with ICWA and maintaining connections with extended family, staff now identifies other opportunities and methods to maintain connections for children in foster care. These can include employment programs, mentorships, hobbies and use of technology (internet, e-mail and cell phones). There is also a Best Practices Bulletin on Preserving Cultural Connections. Workers are relatively diligent about keeping children and youth in the same church, school, and after school activities, even if these are distant from foster parents. Information from Ice Breakers is used to identify opportunities.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

The increase in caseloads without the corresponding increase in resources has impacted the child welfare system's overall performance. As public transportation is lacking in all but a few communities, transportation and distance can create barriers to successfully maintaining connections. Some counties do not have Client Service Agents to support staff. The child welfare system recognizes that there is work to be done to preserve connections, especially with former foster parents, coaches, teachers, *etc.* This is sometimes complicated by potential liability issues. Also, some treatment

foster care agencies disallow contact after the child leaves a placement, and some service providers argue that it is “therapeutically inappropriate.”

***Item 15: How effective is the child welfare system in identifying relatives who could care for children entering foster care, and using them as placement resources when appropriate?***

***a. What do policy and procedure require?***

Permanency Planning and Foster Parenting policies and Licensing Standards for Foster Care address placing children in relative foster care placements. Preference is given to an adult relative over a non-relative caregiver if the relative meets licensing standard. Relatives within the fifth degree of consanguinity may be licensed as foster parents. The worker must complete an initial relative assessment before placing the child, and foster care licensing requirements must be completed within 60 days of placement. Relatives may complete individualized pre-service training focused on the child to be placed with them rather than the standard 10 hours of pre-service training.

***b. What do the data show?***

Quality Assurance data available for calendar years 2006 and 2005 show identical item strength results. Relative placement was rated a strength in 65% of the cases reviewed in 2006 and 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items.

FACTS data from the 0904 report includes all children in out of home placement (N=5,121) and shows that 23% are in relative foster homes. (This might be somewhat underestimated, as this report has not been modified to include new relative service types implemented in January 2006.) Data on relative foster care placement from the 0907 report is for children age 12 or younger at the time of the most recent placement (N=2,540). This report indicates that 20.3% of children age 12 or younger at the time of the most recent placement are in relative foster care homes. CRB data reports 22% in relative foster care.

***c. Where was the child welfare system in Round One of the CFSR?***

This item was rated a strength based on information obtained during the onsite review process through the review of 29 applicable case records (this item was rated a strength in 90% of the cases) and on stakeholder interviews.

***d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?***

CYFD is known to “beat the bushes” for relatives, and families in New Mexico tend to accept responsibility for child relatives. Increasing attention has been placed on identifying paternal as well as maternal relatives. Current data show that rates of relative foster care are now up to 22-23%.

***e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?***

Sometimes there is a delay in the licensing because of concerns raised during the process. There have been some issues of safety dictating a need for a full home study before allowing an emergency placement. The research conducted by the state identifying a greater occurrence of maltreatment in relative foster care than in non-relative foster care has raised issues about current practice as well as about the support and training needed by relatives to effectively care for kin. There has also been a philosophical discussion about moving children from non-relative foster care to relative foster care when non-relative foster parents have bonded with foster children.

***Item 16: How effective is the child welfare system in promoting or helping to maintain the parent-child relationship for children in foster care, when it is appropriate to do so?***

*a. What do policy and procedure require?*

Several sections of Permanency Planning Policy procedures address promoting or maintaining the parent-child relationship. These sections emphasize the need to place children in close proximity to their parents and the importance of on-going contact and involvement of the parents in case planning for their children.

*b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 show a decrease in item strength. Relationship of child in care with parents was rated a strength in 41% of the cases reviewed in 2006 and 52% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

This item was found to be an area needing improvement, based on information obtained during the onsite review process through the review of 21 applicable case records (71% were found to be a strength), and through stakeholder interviews.

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

The child welfare system has been expanding the conceptual framework around this issue. The Quality Assurance Reviews have assisted staff in identifying opportunities to promote the parent-child relationship beyond visitation, to include involvement in case planning, participation in the child’s educational planning, extra-curricular activities, medical care, therapy appointments, *etc.* The child welfare system appears to do better with moms than with dads. Team Decision Making is an asset in identifying opportunities and in promoting the relationship. CYFD is developing structures to promote involvement such as using calendars to document child’s schedules for parents, making more effort to get parents to mediation and education events; providing invitations to parties; offering video and audio connections in some areas and with some incarcerated parents; *etc.*

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system’s overall performance?*

Distance and transportation issues can create barriers in some areas. In addition, there are no Client Service Agents in some counties to support the work of staff. Promoting the parent-child relationship when parents are incarcerated can also be very difficult for the same reasons that impact visitation and involvement in case planning. Children’s service providers create barriers when they are uncomfortable including and working with the child’s parents.

**NOTE:** The following county level statistical reports on permanency are available:

Permanency Composites by County (ACF)

Case Counts by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Foster Care Case Counts by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Adoption Case Counts by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Children in Care by County, Gender, and Ethnicity (July 2006)

Children Entering and Re-Entering Care by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Number of Placements by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Most Recent Placement Type for Children 12 or Younger by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Placement Averages (Number and Months) by County (April 1, 2005 – September 30, 2006)

Exits from Foster Care by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Exits from Foster Care of Disabled Children by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Exits from Foster Care of Children 12 or Older at Entry by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Time to Reunification by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Time to Adoption by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

Time to Adoption for Children Age 3 or Older at Entry by County, Gender, Race, and Ethnicity (September 1, 2005 – August 31, 2006)

## WELL BEING OUTCOMES

### A. Child and Family Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.

#### 1. Data Summary

All child and family well-being outcomes by their very nature demand qualitative data tools. In terms of enhanced family capacity, Item 17 addresses the effectiveness of assessments of the needs of children, parents, and foster parents as well as the provision of services. This item was rated as a strength in Quality Assurance studies in fewer than half the cases. Item 18 focuses on the involvement of children, youth, and parents in case planning and again, Quality Assurance studies show this item as a strength in fewer than half the cases. Item 19 is about visitation with children in care and rates are somewhat better (close to 60%). Item 20 focuses on contact with parents and the data show strengths in fewer than half the cases reviewed. Given these results, the Statewide Assessment Team (SAT) discussed whether the child welfare system as a whole was positioned to accomplish this outcome. They looked at the system's focus on the short term and on urgent needs to address safety and protection. They questioned the system's ability to truly enhance family capacity without long-term engagement and major attention to prevention, intervention, and aftercare. However, they also stressed the need to focus on worker contracts with both children and parents. The SAT noted that outcomes across all items were typically stronger for the maternal side of the family than the paternal indicating that there needs to be a continuing focus on fathers.

#### 2. Stakeholder Assessment

The SAT reviewed the Quality Assurance (CYFD) data for both in-home and foster care cases related to this outcome and concluded that in the long run, the system really does not do enough to enhance a family's capacity to provide for their children's needs because the focus is primarily safety and protection. This outcome expands the focus, suggesting deeper engagement with families.

Many of the families served by the child welfare system are troubled with long-standing and complex issues – *e.g.*, drugs and addictions, and inter-generational abuse and neglect. Child safety is the critical concern and determines which families may be served voluntarily and when the authority of the court is required. Families may avoid involvement during the provision of in-home services, and may not even fully engage when involved in legal cases. Further complicating this issues is the time frames of ASFA requiring families to change patterns in less than a year that may have developed over several generations.

The SAT suggested that the existing model does not serve families well in terms of enhancing well-being outcomes. The SAT felt that the system does not address contextual factors, prevention, intervention, discharge planning, and aftercare. The existing model is an emergency/medical/disease model, requiring the child welfare system to address the immediate child safety issues. This well-being outcome challenges the entire child welfare system to develop a strengths-based, not a fault-based, model.

The SAT recommends that during the on-site review, the team examine whether Team Decision Making processes has positively impacted well-being in terms of a strengths-based strategy to increase family engagement and to promote family involvement in case planning in both in-home and foster care cases.

As with other outcomes, there is a need to look during the on-site review at how the 30% increase in caseloads since Round One has impacted this well-being outcome.

Judges have concerns that the system does not do enough to provide for education, employment, literacy, financial assistance, transportation and other supports for the basic needs of parents. There is a need to look at how lack of services and/or access to services has impacted this outcome in the on-site review, specifically in terms of accessing services for parents and children and differences in rural versus urban areas of the state. There is also a need to focus in the on-site review on the effectiveness of Family Drug Courts in assessing and meeting the needs of children and families

It is sometimes difficult to access services for immigrant populations. Judges report a need for more bilingual workers, training in cultural awareness, and engagement of the immigrant communities that serves as support. Judges noted that in some immigrant populations, the second (younger) generation is managing the family, and this can be complicated.

Related to building the capacity to take care of themselves, youth like the Independent Living Program. Startup payments are helpful, employment help is good; ETVs (Education and Training Vouchers) help a lot. The opportunity to be supported while living on your own is as important as is the ability to have a job. Youth felt that there should be better information about the program for both the youth and new workers. Some of the youth wanted more from their workers – they wanted them to *show up* for them, to be confidants, to be genuine and to be their advocates. Youth also indicated that there should also be more information made available about youth rights and responsibilities.

Youth want an opportunity to meet with Protective Services managers and others, to problem solve, as was done at the Focus Group. They want people in the system to understand the realities of their lives. They want a youth advocate (an ombudsman). Several youth reported being involved in case planning, though by no means all of them. The role of the Youth Attorney to ensure and support the youth's active involvement in case planning should be examined during the on-site review.

## 2. Item by Item Evaluation

*Item 17. How effective is the agency in assessing the needs of children, parents, and foster parents and in providing needed services to children in foster care, to their parents and foster parents, and to the children and families receiving in-home services?*

### *a. What do policy and procedure require?*

Permanency Planning and In-Home Services policies and procedures identify the activities CYFD will carry out to ensure that the needs of the child, the parents, and the foster parents are assessed and services to address those needs are identified. Specifically:

- Assessment Planning: For in-home cases, CYFD is required to develop an assessment plan with the family. For foster care cases, CYFD is required to conduct an Assessment Planning Conference prior to the Custody (10-Day) Hearing. The Assessment Plan must identify the needs of the child and the three primary needs of the family and specify a plan to further assess those needs.
- Treatment Planning: For in-home cases, CYFD and the family develop and implement a family treatment plan based upon the findings of the assessment plan. For foster care cases, CYFD conducts a Treatment Planning conference prior to the Adjudication. The Treatment Plan must address, among other things, the needs of the child and the plan to meet those needs, and the services required to support the substitute care provider.
- Internal Reviews: For in-home cases, CYFD reviews the appropriateness of the treatment plan on an ongoing basis throughout the provision of services. For foster care cases, CYFD conducts an Internal Review Conference prior to the Permanency Hearing and Subsequent Judicial Reviews. This conference addresses whether or not family needs and strengths have changed, whether any of the three primary family needs levels have changed, and what revisions to the treatment plan should be presented to the court.

### *b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 show for both in-home and foster care cases a slight decrease in item strength. Needs and services of child, parents, and foster parents was rated a strength in 38% of the cases reviewed in 2006 and 40% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items. (Overall, Outcome One was rated as 35% substantially achieved in 2006 and 28% in 2005; 35% partially achieved in 2006 and 48% in 2005;

and 30% not achieved in 2006 and 24% in 2005.) In general, performance was stronger in foster care cases than in in-home services cases.

*c. Where was the child welfare system in Round One of the CFSR?*

Per the federal report, “the determination that needs and services of children, parents, and foster parents was an area needing improvement was based on information obtained during the onsite review process through the review of 50 applicable case records and stakeholder interviews. This item was rated a strength in 78% of the applicable cases. Among the applicable cases reviewed, 29 were cases in which children were in foster care and 21 were cases in which services were being provided while the child remained in the home. In 83% of the applicable foster care cases this item was rated as a strength as compared to 71% of the applicable in home cases.”

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

Since Round One, CYFD revised the provision of voluntary services. In-Home Services replaced Family Preservation Services. In-Home Services is an integrated, comprehensive approach to strengthening and preserving families that are at risk or already experiencing problems in family functioning and whose children are at risk of out-of-home placement or continued out-of-home care. This change to practice was implemented to address repeat maltreatment and re-entry into care. As In-Home Services is targeted at high risk, high need families, and is seen as a placement prevention effort, a significant number of the families eligible for In-Home Services come to the attention of the agency through an emergency temporary custody.

The Mediation Program and Team Decision Making provide opportunities within a neutral setting to assess and identify services for families. “Ice Breakers”, meetings between foster parents and parents, assist foster parents in knowing the likes and dislikes of children in new placements and provide the opportunity for parents and foster parents to join together in parenting the children. Following CFSR Round One, workers were trained to do more thorough assessments. At the county office level, CFSR changes are incorporated on an ongoing basis. For example, many counties are using a log to track the contacts with children and foster homes. There is now a Best Practices Bulletin called Well-Being Checklists that encourages all stakeholders to use a checklist which covers the scope of well-being concerns.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system’s overall performance?*

There are gaps in the service array, particularly in rural areas and a lack Spanish speaking workers and service providers for the growing population that the child welfare system serves. CYFD has attempted to increase the number of Spanish speaking workers using existing mechanisms within the state personnel system. Each office is able to identify and provide a pay rate differential for staff fluent in other languages needed to serve families in that area.

***Item 18. How effective is the child welfare system in involving parents and children in the case planning process?***

*a. What do policy and procedure require?*

There are numerous references to child and family involvement in case planning in policy and procedure. Both In-Home Services and Permanency Planning Policy requires the all plans be developed in collaboration with the family and that “active efforts” to locate both parents and involve them in case planning should occur. In addition to the parents, Permanency Planning Procedures require the worker to encourage the participation and involvement of family members and the substitute care provider in the development of the treatment plan.

*b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 for both in-home and foster care cases show a slight increase in item strength. Child and family involvement in case planning was rated a strength in 48% of the cases reviewed in 2006 and 45% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

Per the federal report, “the determination that child and family involvement in case planning was an area needing improvement was based on information obtained during the onsite review process through the review of 50 applicable case records and stakeholder interviews. This item was rated a strength in 80% of the applicable cases. Among the applicable cases reviewed, 29 were cases in which children were in foster care and 21 were cases in which services were being provided while the child remained in the home. In 83% of the applicable foster care cases this item was rated as a strength as compared to 76% of the applicable in home cases.”

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

A degree of the change in performance is reflective of more stringent requirements than assessed in Round One. The State believes that these requirements, especially those concerned with the involvement of absent fathers and incarcerated parents, are consistent with expectations for Round Two. The Team Decision Making process has promoted the involvement of children and families in case planning. Awareness of the importance of inviting youth to the planning and court events has grown since Round One. The initiation of Youth Attorneys for young people 14 years and older is designed to facilitate youth involvement. More attention is being paid to finding fathers earlier in the process than in the past. Efforts to work with parents who are incarcerated have improved.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

Overall, incarceration creates difficulty in family involvement no matter how cooperative jails and correctional institutions are. Language may be a barrier with a lack of Spanish speaking workers. When children are placed out of county to access behavioral health treatment services, distances often complicates involvement in planning. Engaging families to be effectively involved in planning in voluntary cases is noted to be more challenging than involving families in legal cases.

***Item 19. How effective is the child welfare system in conducting face-to-face visits as often as needed with children in foster care and those who receive services in their own homes?***

*a. What do policy and procedure require?*

In-Home Services policies and procedures require weekly visits with child during the provision of level one service. Permanency Planning policy requires CYFD to visit each child in CYFD custody at least monthly in the child's placement.

*b. What do the data show?*

Quality Assurance data for in-home and foster care cases for calendar years 2006 and 2005 show a slight increase in item strength. Worker visits with the child was rated a strength in 58% of the cases reviewed in 2006 and 56% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

Per the federal report, “the determination that worker visits with the child was an area needing improvement was based on information obtained during the onsite review process through the review of 50 applicable case records and stakeholder interviews. This item was rated a strength in 78% of the applicable cases. Among the applicable cases reviewed, 29 were cases in which children were in foster care and 21 were cases in which services were being provided while the child remained in the home. In 79% of the applicable foster care cases this item was rated as a strength as compared to 76% of the applicable in home cases.”

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

A degree of the change in performance is reflective of more stringent requirements than assessed in Round One. The State believes that these requirements, especially those that consider the quality of the visitation, are consistent with expectations for Round Two. Specifically, the Quality Assurance review not only considers if the visitation is occurring (quantitative measure) but the quality of those visitations. As part of the Round One Program Improvement Plan, there has been a great deal of effort and emphasis put into making sure visits with children and youth occur. Policy and practice discussions have focused on the quality of visits, what caseworkers and others should be observing and documenting, and how this information should be used. Visitation Guidelines have been written and help with quality of visits and quality of documentation. County Office Managers in many sites are maintaining tracking logs to ensure visits are occurring. This practice will be maintained and expanded.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system’s overall performance?*

Distance is often an issue, and it can take a full day to do a single home visits in many areas. The workload and increased documentation also are challenging. Caseloads, vacancies and turnover are issues, and not all counties have Client Service Agents to assist in transportation and other supports.

***Item 20. How effective is the child welfare system in conducting face-to-face visits as often as needed with parents of children in foster care and parents of children receiving in-home services?***

*a. What do policy and procedure require?*

In-Home Services policy and procedures requires weekly visits with parents during the provision of level one services. Permanency Planning Policy requires CYFD to have at least monthly face-to-face contact with each parent of a child in CYFD custody.

*b. What do the data show?*

Quality Assurance data for in-home and foster care cases for calendar years 2006 and 2005 show an increase in item strength. Worker visits with parents was rated a strength in 46% of the cases reviewed in 2006 and 39% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

Per the federal report, “the determination that worker visits with parents was an area needing improvement was based on information obtained during the onsite review process through the review of 43 applicable case records and stakeholder interviews. This item was rated a strength in 81% of the applicable cases. Among the applicable cases reviewed, 22 were cases in which children were in foster care and 21 were cases in which services were being provided while the child remained in the home. In 77% of the applicable foster care cases this item was rated as a strength as compared to 86% of the applicable in home cases.”

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

A degree of the change in performance is reflective of more stringent requirements than assessed in Round One. The State believes that these requirements, especially those around involving fathers, incarcerated parents and examining the quality of the visitation in addition to the quantity, are consistent with expectations for Round Two. Prior to Round One, CYFD did not have a policy concerning a minimum standard for visitation with parents. Recently, there are renewed efforts being made to visit with parents in their homes, as opposed to limited visitation to office settings. CYFD is increasingly diligent about looking at what is convenient for parents and working around their needs, including holding visits after hours and weekends. Many County Office Managers are using tracking logs to ensure that visits happen in a timely manner. This practice will be maintained and expanded.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

Distance is often an issue and it can take a full day to conduct a single home visit in many areas. The workload and increased documentation also are challenging. For reasons discussed earlier, incarceration impacts access to parents. Not all counties have Client Service Agents to assist in transportation and other supports.

**B. Child and Family Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.**

**1. Data Summary**

Qualitative data were available to address this outcome and the one item involved. Education needs of the child was rated a strength in 73% of the cases reviewed in 2006 and 75% in 2005. Stakeholders noted probable barriers related to difficulties in navigating the education system, especially when a child or youth is participating in special education. They expressed concerns that the education and child welfare systems are not sufficiently integrated.

**2. Stakeholder Assessment**

The SAT reviewed the Quality Assurance (CYFD) data for in-home and foster care cases related to this outcome and noted that there are difficulties navigating the education system. The assessment of educational needs for applicable in-home services is not consistently conducted. Possibly more direction to field staff is required to determine when it is reasonable to expect the agency would address educational issues given the circumstances of the case.

In foster care cases, the SAT suggested that the role of the foster parent needs to be better delineated. Roles and responsibilities may vary from case to case depending upon the needs of the child, and the experience of the foster parent and the worker.

Stakeholders reported that services do not follow the child when there is a school change. Stigmatization of foster youth is also a barrier. There is the perception that foster youth are "temporary." They also noted that there is a lack of integration between the child welfare system and the education system.

Stakeholders recommended the development of an "education expert consultant" position on staff at CYFD – a "go to" person for workers and others working on behalf of children and youth. This concept should be taken to PIP discussions.

Judges suggested that by addressing the educational needs of the parents, the system could positively impact their ability to address the children's educational needs. They felt that there is a need for services relating to literacy, adult basic education, GED attainment, and vocational training. Judges are aware that they can appoint an education advocate, as outlined in the Best Practice Bulletin on Education Advocacy.

Youth say that there are too many school changes, and everyone should work harder to keep youth in the same school when placements change. These youth want an education advocate. They also want to be given information about possible choices for high school – charter schools and other options. Youth report they benefit from having tutors and mentors to help them succeed in school.

Foster parents report that schools need to have better trained staff to deal with the needs of foster children, for example, more trained aides for special education children; and training for teachers and administrators.

### 3. Item by Item Evaluation

*Item 21: How effective is the child welfare system in addressing the education needs of children in foster care and those receiving services in their own homes?*

#### *a. What do policy and procedure require?*

In-Home Services procedures require the consideration of educational history in case plan development but do not provide clear direction on when it would be reasonable, given the circumstances of the case, to expect the agency to address educational issues. Permanency Planning Policy requires CYFD to provide or arrange services for the child including educational services. Permanency Planning procedure details the educational information which must be documented in FACTS.

#### *b. What do the data show?*

Quality Assurance data for in-home and foster care cases for calendar years 2006 and 2005 show a slight decrease in item strength. Education needs of the child was rated a strength in 73% of the cases reviewed in 2006 and 75% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items. (Overall, Outcome Two was rated as 73% substantially achieved in 2006 and 75% in 2005; 6% partially achieved in 2006 and 16% in 2005; and 21% not achieved in 2006 and 9% in 2005.)

#### *c. Where was the child welfare system in Round One of the CFSR?*

Per the federal report, “the determination that the educational needs of the child was an area needing improvement was based on information obtained during the onsite review process through the review of 43 applicable case records and stakeholder interviews. This item was rated a strength in 84% of the applicable cases. Among the applicable cases reviewed, 26 were cases in which children were in foster care and 17 were cases in which services were being provided while the child remained in the home. This item was rated a strength in 88% of the applicable foster care cases, as compared to 76% of the applicable in home cases.”

#### *d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

In many counties, workers are attending Individual Education Program meetings (IEP's), Next Step Plan meetings (NSPs), and other school-related events. They are more active in requesting that youth be assessed for special education needs and Individual Education Programs. Sometimes, CASA's, youth attorneys, GALs, and others will also attend these meetings and events. Foster parents are often the educational decision-makers for the children; however, they still need more information and more support. Efforts are being made to get the biological parents involved as well. The recent formation of the Department of Education as a state agency has helped in terms of coordinating state level planning for children and youth. Some counties have school liaisons to provide a formalized mechanism for the child welfare agency and the school to discuss issues that come up with children, referrals being made, and other matters. TDM's have sometimes involved school representatives. There is now a Best Practices Bulletin called Well-Being Checklists that encourages all stakeholders to use a checklist that covers the scope of well-being concerns. A Best Practices Bulletin has also been published and disseminated on

Education Advocacy. In addition, the Benchmark Hearing Best Practices Bulletin includes a number of education items.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

Special education programs are difficult to access, and getting services in some areas of the state is particularly challenging. All stakeholders need to learn more about advocating, about the educational system, and about roles, responsibilities, and rights. However, even when there is advocacy, it can sometimes take months to get services for children. School systems often don't have the services necessary to meet the children's needs. Sometimes CYFD will pay for tutoring and other services rather than battling the school to provide for children's needs. In addition, foster children are often stigmatized. Overall, there could be better collaborative working relationships with the schools regarding access to services for foster children. Cross training is needed, as is more advocacy on the part of all stakeholders.

**C. Child and Family Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.**

**1. Data Summary**

Quality Assurance data related to addressing the physical health of the child (Item 22) was rated a strength in 70% of the cases reviewed in 2006 and 64% in 2005. The Statewide Assessment Team (SAT) concurs with this assessment, viewing access to primary care as an asset. However, the SAT noted challenges in accessing dental and some specialty care as likely contribute to these rates.

Regarding access to behavioral health (Item 23), the Quality Assurance data show that this was rated a strength in 58% of the cases reviewed in 2006 and 62% in 2005. This was a major concern for the SAT and for each of the focus groups. The SAT and focus group members believed that performance was attributed to lack of providers and services in all geographic areas. Factors contributing to the service array issues include lack of qualified providers, reimbursement issues for providers, insufficient levels of community-based services. SAT members believed that performance on item 23 was directly related to the child welfare systems performance on Permanency Composite 4.

**2. Stakeholder Assessment**

The SAT reviewed the Quality Assurance (CYFD) data for in-home and foster care cases related to this outcome and noted a lack of access to dental care; few dentists take Medicaid; Medicaid limits what children and youth can receive, and often this is not necessarily optimal care.

Primary health services, other than dental and some specialty care, are generally accessible and available throughout the state. There still may be long wait times for appointments for non-urgent care.

There is a lack of service array for behavioral/mental health, especially in some geographic areas of New Mexico. This was a view shared by the SAT and across the focus groups participants. Payments to providers are not adequate, with participants suggesting that there has not been a rate adjustment in many years, and there is a general lack of providers. A need for better assessments, more child psychologists and psychiatrists, and substance abuse assessments/treatment was noted. Children and youth are frequently Medicaid eligible, but their parents are not. Many of these families struggle with poverty and have no access to health insurance or health care. Lack of health insurance and inability to access health care created barriers in both in-home and foster care cases.

Tribal stakeholders discussed disparities between cultural groups regarding health and physical needs, which are largely not recognized. There is a lack of services to access traditional healing resources for off-reservation families.

Tribal stakeholders felt that District Courts make it difficult for Native American families to access services. In the past Tribal and District court orders were combined (or at least mutually recognized and honored) and partnerships were evident. They would like some process to look at concurrent jurisdiction to ensure access to services.

There is also a concern about accessing services for Native American children and families, specifically services funded by Titles IV-B and IV-E. The Tribal stakeholders suggested that at times it is in the child's best interest for the Tribe to allow the State to proceed with intervention because that creates quicker access to services for the child. Some Tribal stakeholders felt that CYFD often interprets the Indian Child Welfare Act (ICWA) to mean that if the child is Native American, the case must be managed by the Tribe. However, Tribes often prefer the State to continue with court action to allow the family and child to obtain needed services and resources that the Tribe is unable to access. Team Decision Making meetings within CYFD appear to have improved this process as more in-depth discussions are held on individual cases with more opportunity to factor in Tribal preferences.

Youth reported regular medical and dental visits. Youth expressed concern about requirements to go to therapy and about how the system is too quick to diagnose and to assume a mental health problem. These youth believe that too many foster youth are forced to take psychotropic medications.

Foster parents report that children and youth need dental, eye and medical providers that will take Medicaid. Foster parents also report a need for more therapy for children, starting therapy immediately and continuing for a time after reunification.

## 2. Item-by-Item Evaluation

*Item 22: How does the child welfare system ensure that the physical health and medical needs of children are identified in assessments and case planning activities and that those needs are addressed through services?*

### *a. What do policy and procedure require?*

Permanency Planning Policy requires CYFD to provide or arrange services for the child including medical services. CYFD requires that each child have a complete physical examination within the first 30 days of custody, and when the investigation is substantiated. If there is a child under the age of three in the family, CYFD makes a referral to the Family Infant Toddler Program for an assessment. Additional requirements include provision of scheduled routine medical, dental, and eye care and psychological services; immunization records that are kept current; and that the child's parents be involved in any and all medical decisions and kept informed of the child's health status.

### *b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 show an increase in item strength. Physical health of the child was rated a strength in 70% of the cases reviewed in 2006 and 64% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are "not applicable" on various items. (Overall, Outcome Three was rated as 58% substantially achieved in 2006 and 50% in 2005; 17% partially achieved in 2006 and 28% in 2005; and 25% not achieved in 2006 and 22% in 2005.)

### *c. Where was the child welfare system in Round One of the CFSR?*

This was an area needing improvement in Round One. Per the federal report, "the determination that physical health of the child was an area needing improvement was based on information obtained during the onsite review process through the review of 47 applicable case records and stakeholder interviews. This item was rated a strength in 81% of the applicable cases. Among the applicable cases reviewed, 29 were cases in which children were in foster care and 18 were cases in which services were being provided while the child remained in the

home. In 83% of the applicable foster care cases this item was rated as a strength as compared to 78% of the applicable in home cases.”

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

There are now clinics in Albuquerque that provide comprehensive services to foster children and youth. These include the Healthy Beginnings Clinic, Cares Clinic, and the new Teen Care Clinic (initiated by Healthy Beginnings and located at Carrie Tingley Hospital). At the stage of investigation, there is the Child Abuse Response Team (CART) that is able to serve children and youth statewide. Services include psychological evaluations as well as comprehensive exams, including dental. CART is at the University Hospital and can be used by anyone from other counties if the youth is sent to Albuquerque; it is essentially a trauma team. In addition, Dr. Karen Campbell is on the CYFD staff for consultations related to meeting the on-going physical needs of children, and to assist with identification of specialists, as needed. There are traveling dental clinics in Roswell, Dona Ana, and Santa Fe Counties, although these are not limited just to foster children. Routine health care is generally accessible statewide, but for other needs individuals have to travel to Albuquerque. Finally, EPSDT's (Early Periodic Screening, Diagnosis, and Treatment) are considered to be more comprehensive and meaningful than in the past. There is also a Best Practices Bulletin on using Well-Being Checklists that include health criteria. Many county offices meet with Family Infant Toddler Program staff on a regular basis, typically quarterly, to ensure service delivery to families, refine the referral process as needed, and to access training for staff. Recently, a Program Instruction Guideline was issued to further delineate CAPTA/FIT Referral Requirements, and training was held statewide.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

Specialized care is generally not available except in Albuquerque. In addition, if the child is not documented, all services must be paid for from the State General Fund, and it is very costly to provide for physical health needs in today's health care environment. CYFD and Department of Health have developed good working relationships as the result of the federal CAPTA requirement, resulting in high quality, early intervention services for children.

*Item 23: How does the child welfare system ensure that the mental/behavioral health needs of children are identified in assessments and case planning activities and that those needs are addressed through services?*

*a. What do policy and procedure require?*

Permanency Planning Policy requires CYFD to provide or arrange services for the child, including psychological services and treatment and habilitation services. There is no specific requirement for an initial mental health screening/evaluation upon entry into foster or for provision of in-home services.

*b. What do the data show?*

Quality Assurance data available for calendar years 2006 and 2005 show an decrease in item strength. Mental health of the child was rated a strength in 58% of the cases reviewed in 2006 and 62% in 2005. The 2006 review included 131 cases; the 2005 review included 144 cases. Variable numbers of cases are “not applicable” on various items.

*c. Where was the child welfare system in Round One of the CFSR?*

This was an area needing improvement in Round One. Per the federal report, “the determination that mental health of the child was an area needing improvement was based on information obtained during the onsite review process through the review of 44 applicable case records and stakeholder interviews. This item was rated a

strength in 77% of the applicable cases. Among the applicable cases reviewed, 27 were cases in which children were in foster care and 17 were cases in which services were being provided while the child remained in the home. In 81% of the applicable foster care cases this item was rated as a strength as compared to 71% of the applicable in home cases.”

*d. What changes in performance and practice have been made since Round One? Overall, what are the strengths and promising practices that the child welfare system has demonstrated?*

The psychotropic medications project continues. UNM and Healthy Beginnings do mental health assessments and are familiar with what is needed regarding foster care. They make recommendations for children in CYFD custody and for youth at the Teen Clinic, as well as for the obesity group. Family Stabilization Work in Albuquerque provides home based services with either biological or foster families. There are good relationships with community providers generally, and often they will jointly staff cases, *etc.* Contracts are being pursued to have lay people be mentors/promotoras to assist families, and to meet quarterly with service providers to ensure services are available and appropriate for children. Placement Services develop a calendar to work with local mental health professionals to provide training to foster parents around topic areas such as Behavior Modification, Reactive Attachment Disorder (RAD), *etc.* CYFD continues to work with the Behavioral Health Purchasing Collaborative and ValueOptions New Mexico to advocate for behavioral health services for children and their families. There is now a Best Practices Bulletin called Well-Being Checklists, which encourages all stakeholders to use a checklist which covers the scope of well-being concerns. There is also a Best Practices Bulletin on using Well-Being Checklists that include behavioral health criteria.

*e. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance?*

The biggest issue is the lack of services and service array for behavioral health. Some counties have very few service providers, and it is difficult to find resources; some providers are beginning to charge clients for services. Some areas do not have resources for diagnosis, especially substance abuse. Transportation is a huge issue for families, and there is a need for more community-based and home-based services. Some providers do not really engage with CYFD families, and the sense of urgency CYFD workers feel about reunification is not realized by community providers. Oftentimes CYFD is not notified when families do not follow through on scheduled appointments. Some child welfare professionals would suggest that perhaps we are not acknowledging cultural barriers in terms of the time needed for engagement; that CYFD does not have a system that addresses cultural differences; and that perhaps we need different skill sets and comfort levels among providers. The language barrier is a challenge (especially on the border) in accessing services from community providers. There is a lack of bilingual providers and materials. Within cultural barriers the child welfare system needs to look at lifestyle and class and not just race and ethnicity. The transition to the Behavioral Health Purchasing Collaborative and single statewide entity for providing and accessing services is still occurring and has created a disruption in the provision of services. The increases in service array and system capacity hoped for, have not yet been realized.

#### IV. NARRATIVE ASSESSMENT OF SYSTEMIC FACTORS

The assessment of each systemic factor includes two parts. The first is the Stakeholder Assessment, which includes information primarily from the Statewide Assessment Team. This component is directed at evaluating the factor as a whole (including factor ratings on the four-point scale), identifying major issues, and pointing to areas for further exploration in the on-site review and PIP phases of the CFSR. The second part of each factor assessment is an Factor Evaluation, which includes information on current policy and procedure, a description of the results of the first CFSR; a summary of changes since the first CFSR (including current strengths and assets); and a discussion of barriers.

##### A. Systemic Factor: Statewide Information System

*The State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care. (Item 24)*

###### 1. Stakeholder Assessment

The SAT acknowledged that the FACTS system indeed has the data elements and capacity as required of this factor, and that it is generally accessible and efficient. Overall, they rated this factor as a “4.”

Though not related to the capacity required of this factor, participants noted that FACTS should have more capacity to cross-reference with Juvenile Justice Services, and that FACTS should have more “real estate” for case specific goals, outcomes, *etc.* They also commented that some workers may not be adequately trained in FACTS or are otherwise technophobic (for example, some do not know how to update old data). Other comments included the lack of support staff to assist with data entry; that FACTS data entry takes a lot of caseworker time; and that spelling and grammar errors are bothersome. Finally, CRB representatives noted that the data they need for reviews is in FACTS but the mechanisms for providing it to them varies across the State. There was a question about whether that data could be routinely made available electronically.

###### 2. Factor Evaluation

###### a. What do policy and procedure require?

Throughout policy and procedure there are references to the Statewide Information System, the Family Automated Client Tracking System (FACTS) and the documentation required there. There are many requirements in state statute supportive of the use of data for the child welfare system.

###### b. Where was the child welfare system in Round One of the CFSR?

New Mexico was found to be in Substantial Conformity. Per the federal report: “New Mexico CYFD utilizes a comprehensive statewide information system called FACTS that is capable of capturing information relative to the status of children in foster care. FACTS is accessible and used by all CYFD staff and can identify demographics, location, characteristics and goals for every child.” The one area noted as needing improvement in the first round was the State's submissions to AFCARS of historical data for children currently in custody who had entered care prior to 1997, the year the State converted to FACTS. This issue has been resolved.

###### c. What are the strengths and promising practices that the child welfare system has demonstrated in terms of its statewide information system?

The FACTS is a statewide client/server information system that provides case management tools for caseworkers and managers in the program areas of Child Protective Services, Adoptions, Foster Care, Statewide Central Intake and In-Home Services. FACTS is comprehensive and can readily identify the status, demographic characteristics, location and goals for the placement of every child who is in foster care. In 2006, New Mexico achieved Tier One status for FACTS from ACF and in January of 2007, New Mexico submitted its final APD-U.

Some of the key functional components of the system include:

- FACTS enhances efficiency by providing case workers with desktop access to a client's case history. FACTS provides timely access to case histories and detailed records as well as a central registry about past referrals, allegations and findings.
- FACTS automates routine paperwork allowing case workers to spend more time with clients.
- FACTS supports a structured approach to daily activities of case workers.
- FACTS promotes accountability within CYFD by requiring critical data information to be entered before other case management tasks can be performed.
- FACTS automatically generates reminders of important events to attorneys, case workers and supervisors.
- FACTS periodically provides management reports which can be used to track performance and outcome measures related to the safety, permanency and well being of children in CYFD care. Examples of these reports include the New Mexico Outcome Report, Pending Investigation Report, and Targeted Case Management Report.

d. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance in terms of the statewide information system?

Because FACTS child welfare data is complex and captured across multiple tables, FACTS reports are challenging to read. Also, most Facts elements will need to be redesigned to be consistent with CFSR Round Two measures. Data on in-home services are inadequate and need to be able to track information consistent with CFSR in-home sampling requirements. While the current statewide information system is operating in substantial conformity and had achieved Tier One status, New Mexico recognizes that IT resources and support is limited by fiscal constraints, and there is an ongoing challenge to use technological advances to further support field staff and managers.

## B. Systemic Factor: Case Review System

*The State provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions. (Item 25)*

*The State provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review. (Item 26)*

*The State provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months, thereafter. (Item 27)*

*The State provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act. (Item 28)*

### 1. Stakeholder Assessment

Overall, the Team determined that the Case Review System included the requisite components: written case plans, involving parents, and reviews; 6 month judicial reviews; permanency hearings; and TPR proceedings consistent with ASFA. The New Mexico Children's Code adequately addresses all items, and procedures and paperwork are in place to compel compliance. They rated this factor "4."

In addition to the components required of this factor, the Team commented on several related issues. They thought that Item 26 should address youth being involved in case planning as well as parents. This is a very high priority for New Mexico. They also questioned the wisdom of parents meeting their plan, which in essence sets aside the child's plan with the return home. They noted that the Court is the dismissing entity, and perhaps there is a need to educate the bench. This is a Well Being issue and requires aftercare/follow-up planning.

In terms of review every six months, it was noted that there are judicial reviews and that CRB reviews are also more or less on a six-month basis, once the child comes to permanency hearing. The consistency of CRB reviews is facilitated by the fact that Children's Court Attorneys give notice to CRBs of all judicial events. CRBs still have an issue with accurate Interested Parties lists in some areas of the State. Administratively, supervisory reviews have become more standardized and Adoption and Adolescent Review Teams (AART) now provide an invaluable review function on these high priority cases.

Requirements for Permanency Hearings are in the Code and in Department Policy and Procedure, as are requirements around TPR. These are consistent with ASFA in terms of compelling reasons for continued efforts toward reunification, and in terms of the 15/22 months requirement and the requirement for filing of the TPR petition. There is, however, a need to train caseworkers to identify and document the compelling reasons which is consistent with the language in the Code.

## 2. Factor Evaluation

### a. What do policy and procedure require?

Protective Services policy and procedures outline the process for case plan development, require regular reviews of the status of each child by the court, internally and by the Citizen Review Board and set forth provisions for the pursuit of termination of parental rights. Specifically:

- Permanency Planning and In-Home Services Policy outlines the requirements for developing safety, assessment and treatment plans with the family and contains requirements for the contents of assessment and treatment plans.
- Policy and procedures outline a process for staffings and case reviews.
- Policy requires CYFD to refer each child to the CRB, as required by the New Mexico Children's Code.
- Policies and procedures outline the process for adjudication, permanency hearings and judicial reviews within timeframes specified in the Children's Code..
- Policies and procedures require that in the case of a child who has been in foster care 15 of the most recent 22 months, CYFD moves for TPR by the end of the 15th month in foster care, unless the child is being cared for by a relative, or CYFD has documented compelling reason(s) for not filing, or CYFD has not provided services deemed necessary for the safe return of the child within the time period in the case plan.
- CYFD gives the foster parents of a child and any pre-adoptive parents or relatives providing care for the child timely notice of and an opportunity to be heard in permanency hearings and permanency review hearings.
- CRB provides the foster parents, pre-adoptive parents or relatives providing care for the child with timely notice of and an opportunity to be heard before the board.
- Policies and procedures for In-Home Services and Permanency Planning contain requirements for the ongoing review of case plans.
- Contracted In-Home Services Cases are staffed on a continuous basis with CYFD staff who referred the case. Training with contract In-Home Service Providers has focused on CFSR outcome measures, in an effort to standardize In-Home Services. Regular and on-going monitoring of contracted services ensures that In-Home Service Providers comply with case plan requirements.

### b. Where was the child welfare system in Round One of the CFSR?

New Mexico was found to be in **Substantial Conformity**. Per the federal report: "The review determined that children have written case plans, which include the required provisions. Court hearings and administrative

reviews are held at required intervals. Caseworkers, attorneys, and guardians ad litem were described as experienced and prepared. Although the State's more rigorous time frames for permanency hearings were not always met; the Federal time frames were met."

c. What are the strengths and promising practices that the child welfare system has demonstrated in terms of its case review system?

In terms of case plans, children receiving in-home services and children in foster care have written case plans that are developed, reviewed, and updated in accordance with agency policy and procedure for timeliness and content. For children in foster care, the Assessment Plan is developed prior to the 10 day custody hearing; the Initial Treatment Plan is developed prior to the Adjudicatory Hearing (or within 60 days of entry); and the Treatment Plan is updated at least every six months. Plans must include an assessment of safety assessment phase, an assessment of risk in the treatment plan, and a visitation plan, permanency goal, services, steps, responsible parties and timelines in all plans. Structured Decision Making tools are used for the safety and risk assessments and reassessments. Specific items and steps/services are required to meet the child's needs for safety and permanency; education, health, and behavioral health needs; and any special needs identified for the child and family. The FACTS system requires entries on case plans and these identified components.

Regarding the involvement of parents and youth, policy and procedure also require that active efforts be made to locate and engage both the child's mother and father in planning for the child. In addition, the New Mexico Children's Code requires a mandatory meeting prior to the adjudicatory hearing. Parents and other parties are required to attend this meeting to "attempt to settle issues attendant to the adjudication hearing and develop a proposed treatment plan that serves the child's best interest." The New Mexico Children's Code also requires a mandatory meeting of all parties prior to the permanency hearing. The purpose of this meeting is "to attempt to settle issues attendant to the permanency hearing and develop a proposed treatment plan that serves the child's best interest."

The Casey Team Decision Making program (used for 48 hour holds, change of plan staffings, and with change of placement) in Bernalillo County is effective in engaging parents and age-appropriate youth. Similar team-based processes in other counties are also promising. Quality Assurance reviews have served to emphasize the importance of engaging youth and families in planning for both in-home and foster care cases. Through training and supervisory support, workers are increasingly conscientious and diligent in reaching out to youth and families and engaging them in planning throughout the case. The new Youth Attorneys are also an important element in pushing for child and youth involvement. There will soon be a Best Practices Bulletin on engaging youth as well as a model for transition planning that is youth centered and begins at age 14. Parents are also invited and given an opportunity to participate in CRB hearings. CRBs review cases prior to the initial permanency hearing and prior to subsequent judicial reviews. The Code requires that CRBs will give notice of hearings to the parties, and the parties will "be afforded the opportunity to participate fully in the meeting." The Department provides the participant list to the CRB. Parents have the opportunity to participate in all court hearings.

In terms of the review of case plans, there are judicial reviews as well as internal and external reviews. At least four court hearings are held by the children's court in the first twelve months that the child is in custody. The first hearing is held within ten days of the petition being filed and is referred to as the temporary custody hearing or the 10-day hearing. The adjudication is heard within 60 days of the parents being served with the abuse/neglect petition. Most of the time, the dispositional hearing is held in conjunction with the adjudication. A judicial review is held within 60 days of the disposition. A permanency hearing is held within six months of the initial judicial review. Thereafter, the court reviews the case at least every six months. Though not required by the Code, these judicial reviews are actually conducted like permanency hearings. In some Courts and in some cases, judges hold more frequent status review hearings. Through a collaboration with Court Improvement Project and others, the system is also promoting "benchmark hearings" for youth minimally at age 14 and 17 ½ years. These hearings focus on various criteria related to transition planning.

External review is done by Citizen Review Boards that review every child's case prior to the permanency hearing and prior to subsequent judicial reviews. Internal reviews are now conducted by supervisors, rather than Social

Work Consultants, on a monthly basis. The Adolescent and Adoption Review Team (AART), comprised of consultants internal and external to the agency, conducts reviews of specific cases every sixty days until permanency has been achieved. In Chavez County, as an example of a promising practice, team reviews of every case take place every six months with COMs, supervisors, and caseworkers. Additionally, staffing logs are utilized to review progress. "Youth Decision Making" is being piloted in Bernalillo County as a way to achieve youth centered and team-based transition planning and review.

Quality Assurance Reviews ensure that periodic reviews happen and are documented. CYFD staff support participation of both birth and foster families, and age appropriate children, in such reviews by providing support services. This includes preparation of the family and provides assistance to attend hearings and any other reviews of the case.

Under the Children's Code, a permanency hearing is held 11 months after the abuse/neglect petition is filed. In addition, all subsequent judicial reviews are conducted as permanency hearings although this is not required by the Code. To promote timeliness of these hearings, Best Practice Bulletins have been issued on advance calendaring, special calendaring, and "pacing permanency" (essentially a call to minimize continuances with adjudications). Eventually these practices may be moved to requirements through rules or other processes. Quality Assurance reviews include the timeliness of permanency hearings. In addition, the new CIP data grant is directed to intensive review and editing of the Court's data system, so that it attains sufficient reliability and validity to produce performance measures of timeliness with all court hearings.

New Mexico's policy, procedure, and process for termination of parental rights proceedings is consistent with the provisions of the Adoption and Safe Families Act. There are standardized forms and ticklers consistent with the 15/22 requirement (tickled at 13 months). Quarterly FACTS reports show rates of termination and compliance with timeframes across the State. These data could be used more extensively to improve practice. In some counties, meetings are being held with judges to ensure that TPRs are docketed with sufficient time. Often, these meetings are used to collaborate on additional docketing issues and a range of child welfare issues within the community. When there are compelling reasons not to pursue TPR, it is usually when parents show substantial compliance, and children are likely to be going home.

The State process for notice of foster parents, pre-adoptive parents, and relative caregivers of children in foster care is managed by Children's Court Attorneys (CCA) through standard operating procedures. The Children's Code requires the CCA to provide notification of judicial hearings to substitute care providers and pre-adoptive parents with whom the child is residing. CCAs use a form letter that is sent to the foster parents and other parties to notify them of court hearings. Citizen Review Boards also send notices to foster parents, pre-adoptive parents, and relative caregivers asking them to participate in the CRB review process. The case worker provides a list of Interested Parties to the CRB, and the CRB invites these Interested Parties to the upcoming review.

d. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance in terms of the case review system?

Large caseloads and staff vacancies make consistency in case planning and review a challenge in some areas of the State. Barriers are created by court docketing issues, although Best Practice Bulletins are beginning to address this issue. The practice of commencing and continuing the adjudication is problematic but is also being addressed through the Best Practices program.

There could be better tracking of the 15/22 month requirement. There is also some vulnerability in the data and in the documentation of compelling reasons. Counties and regions with higher rates of termination should be studied and promising practices replicated.

### C. Systemic Factor: Quality Assurance System

*The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children. (Item 30)*

*The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented. (Item 31)*

## 1. Stakeholder Assessment

The Team acknowledged that the overall Quality Assurance System includes the requisite standards (foster care standards, treatment foster care standards, child care standards, criminal and background records check requirements, licensing of relatives policies, monitoring of foster homes policies, medical screening policies, traveling file requirements, *etc.*) and the monitoring thereof. They also concurred that the current Quality Assurance system which involves ongoing reviews consistent with CFSR, supervisory reviews, and AART reviews accomplishes the purposes set forth in Item 31. Thus, they rated this factor as a "4."

## 2. Factor Evaluation

### a. What do policy and procedure require?

CYFD requires ongoing case reviews to ensure that families served are provided quality services. "The purpose of quality assurance review is to promote safety, permanence, health, and well-being through a system of quality assurance review that ensures that appropriate and quality services are provided to children and families."

Agency policies and procedures have established a Quality Assurance Review, with a goal of providing "reliable and valid performance and outcome data that will be used to improve service delivery and outcomes for children and families." The QA Unit reviews randomly selected family services or custody cases in each county office every quarter, utilizing the federal CFSR review methodology. The QA unit adopted the new federal case review instrument shortly after its release.

### b. Where was the child welfare system in Round One of the CFSR?

New Mexico was found to be in Substantial Conformity. Per the federal report: "The review determined that the agency has a quality assurance system that assesses the safety and quality of services that are delivered to children in substitute care placement. New Mexico has developed and implemented standards to ensure children are provided with quality services to protect their health and safety. New Mexico adheres to licensing standards and monitors cases."

### c. What are the strengths and promising practices that the child welfare system has demonstrated in terms of its quality assurance system?

Applicable standards to ensure children in foster care are provided quality services include foster care licensing standards, criminal and background records check requirements, licensing of relatives policy, monitoring of foster homes policy, medical screening policies, and traveling file requirements. The foster care licensing standards/regulations outline the requirements and process for licensing foster parents, including criminal records checks and what offenses disqualify applicants. These are consistent with ASFA. The relative licensing policy and procedures are in the Foster Parenting section, as are the requirements for monthly visits. Investigation of abuse/neglect in foster care is covered in the Investigations section. Medical screening is in the Permanency Planning section, requiring a screen within 30 days of coming into care and other procedures that follow the EPSDT. Targeted Case management is also in the Permanency Planning section.

New Mexico has an internal quality assurance process and a supervisory review process. The Department's Quality Assurance unit has been in place since 1998. Both the quality assurance and supervisory review systems evaluate the quality of services, identify strengths and needs of the service delivery system, provide relevant reports, and evaluate program improvement measures. The QA Unit reviews foster care and in-home cases to

achieve quality service statewide. Quality Assurance Review reports are shared with Regional Managers and COMs to implement on-going improvement in service delivery. The Quality Assurance review tool replicates the CFSR on-site review instrument and as such yields information on every item for every outcome. The QA Unit has also been tasked with conducting specialized studies to inform practice and improve service delivery. These data have been used throughout this statewide assessment. A supervisory review tool currently under construction incorporates the CFSR outcomes.

CYFD now retains the services of a CFSR Coordinator who will work closely with County Offices, upon completion of reviews to implement mini-program improvement plans to address challenging areas in individual offices, thus responding more effectively the evaluation of program improvement measures.

The Adoption and Adolescent Review Teams also ensure that CFSR standards are applied to cases. Information obtained from the quality assurance review processes is provided to the agency's Permanency Obstacle Review Team (PORT) to develop strategies to eliminate systemic barriers to achieve better safety, permanency and well-being outcomes for children and families served.

d. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance in terms of the quality review system?

The in-depth nature of the current quality assurance and supervisory reviews of necessity limits the number of cases and counties that can be examined. Management Information reports need to be modified to reflect CFSR Round Two measures, so as to be integrated into the agency's quality assurance process.

#### D. Systemic Factor: Staff and Provider Training

*The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services. (Item 32)*

*The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP. (Item 33)*

*The State provides training 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 base needed to carry out their duties with regard to foster and adopted children. (Item 34)*

##### 1. Stakeholder Assessment

Because this factor suggests qualitative dimensions, the Team ending up assigning a "2.5" rating. They concurred that there is initial (pre-service) training as well as ongoing training. But they noted that there is concern about the total relevancy of the pre-service (CORE) training for workers who may only operate in specific areas. Although previous updates to CORE have occurred, the Department shares this concern, and plans are being developed to enhance and improve CORE and ongoing training. Possible future directions include the provision of regional training, E-learning, shorter modules, and more focus on on-the-job training and follow-up. The Team suggested more coaching, shadowing, and mentoring. The Team also noted a need for updated supervisory training, as well as initial and ongoing training for placement and in-home services staff, and CFSR training for Title IV-B Part II providers. These items are targeted for PIP discussion.

In terms of foster and adoptive parent training, it was noted that New Mexico employs a good curriculum (PRIDE), though the delivery varies by trainer. It was suggested that a Train the Trainer program be implemented, and that the training be made available in multiple languages (a Spanish version has been recently launched in State). Specialized training for relative foster homes is also strongly recommended. These items are also targeted for PIP discussion.

Though not related to this item, it was suggested that judicial officers and related staff need more training. This is being addressed through the new CIP Training Grant. The team also suggested more “specialty training,” which is also in part being discussed as part of the CIP Training Grant’s goal to provide topic/issue driven cross-training on a regional basis.

## 2. Factor Evaluation

### a. What do policy and procedure require?

Staff Training: Pre-service and ongoing staff training is addressed in Protective Services General Policies. This includes a directive for all new workers to participate in four weeks of formal pre-service training before receiving primary case assignments and for all workers to receive a minimum of 15 hours of continuing education annually. In addition, all supervisors and COMs must receive training in supervision within three months of commencing employment as a supervisor or manager and follow-up training annually thereafter.

#### Foster and Adoptive Parent Training:

- Foster Parenting Policy requires that prospective foster parents meet both pre-service and annual training requirements.
- Licensing Standards for Foster Care requires that all foster parent applicants participate in at least ten hours of Department approved pre-service training prior to becoming licensed. (This section allows relative foster parent applicants to participate in individualized pre-service training focused on the specific needs of the child to be placed in their home.) This section also requires that all licensed foster parents participate in at least ten hours per household of Department or program director approved training, annually.
- Adoption Services Policy requires that all prospective adoptive parents attend CYFD approved orientation and training and specifies that adoptive family applicants receive 27 hours of pre-placement training and at least 10 hours training annually in order to maintain an adoptive license.

### b. Where was the child welfare system in Round One of the CFSR?

New Mexico was found to be in **Substantial Conformity**. Per the federal report: “New Mexico offers core and advanced training opportunities for staff. CYFD is collaborating with community partners in terms of providing training. Stakeholders indicated some concerns about the quantity and quality of the training foster parents receive. Follow-up training was not always built into the training structure and a comprehensive training on the Indian Child Welfare Act was not mandatory, although ICWA training is included in the mandatory pre-service CORE training for all new workers. Cross-cultural training for foster and adoptive parents that insures that children’s cultural needs related to customs, grooming, dietary needs, and religious practices was not always available. New Mexico was found to be in substantial conformity on this systemic factor even though there is a need to update some training curricula.”

### c. What are the strengths and promising practices that the child welfare system has demonstrated in terms of its staff development and training system?

As required by CYFD Policy and Procedures, all new child welfare staff begin attending CPS CORE Training within the first thirty days of hire. CORE presently consists of 140 hours of training, presented in four 35 hour blocks, over four weeks. A social worker is not eligible to undertake primary responsibility for a caseload of children in custody until the social worker completes the legal training and passes a written proficiency test, offered in the first week of CORE. CORE training includes the following:

- New Mexico Children’s Code-all stages of abuse/neglect proceedings;
- Federal child welfare laws and regulations;
- Culture sensitivity;
- ICWA;
- Intake;
- Investigation;
- Assessment of abuse/neglect and use of Safe Houses;
- Structured Decision Making;

- Permanency planning (assessment, treatment and implementation of permanency planning goals);
- FACTS - CYFD's Management Information System;
- Financial management of cases;
- Placement and Adoptions;
- Medical assessments and care;
- Court reports and court testimony;
- Worker safety;
- Work and stress management;
- Domestic violence;
- Concurrent planning;
- TDM;
- AART process;
- CASA and CRB;
- IV Eligibility;
- Independent living; and
- Systems of Care.

The CORE Training Program is in need of some revision and reorganization. Possible future directions include regional training, E-learning, shorter modules, and more focus on on-the-job training and follow-up. There is also a need for updated supervisor and COM training (particularly with ever-growing roles in quality assurance), as well as training in placement and in-home services. CFSR needs to be woven into all training. (Currently this is trained and reinforced as a by-product of the extensive quality assurance review process). In general, workers are trained initially in a training environment and on-the-job, with mentoring provided in many offices by more experienced workers and/or supervisors.

In terms of ongoing training, New Mexico State University provides state-of-the-art training that addresses the skills and knowledge base needed by workers and others. Cultural competence, bias and decision making in child welfare is the topic of a recent training sponsored by NMSU to directly address cultural competency statewide. Quality Assurance is also a major asset as workers get feedback on reviews which are tied to the CFSR process. There is also an annual Children's Law Institute, numerous specialized trainings, and some mandatory trainings. Fifteen CEUs are required to maintain a Social Work license in New Mexico. In addition, Supervisors work with staff to provide for skills-based training, linked to their performance. There are also mentor programs in some county offices where new staff shadow senior workers and supervisors to ensure that skills learned at CORE are carried into practice in the field. CYFD also supports staff in their professional development. Each PS employee is offered a stipend and administrative leave with which to purchase training of their choice. This type of training, while creating many difficulties in tracking and measuring, offers great opportunities for statewide networking and the proliferation of new ideas.

New Mexico Children's Code requires all foster parents to be licensed. CYFD/PSD policy and procedures require that all foster parent applicants attend 27 hours of pre-service training. CYFD/PSD Policy and Procedures require that foster parents approved by the State or by private agencies must attend a minimum 10 hours of training annually. New Mexico uses the PRIDE training for current or prospective foster and adoptive parents. Local foster parent associations also provide training using stakeholders from the community to address specific challenges identified by foster parents. PRIDE is an effective curriculum but can vary by trainer. The Department is just now introducing PRIDE training in Spanish. There is a need for specialized training for relative foster homes. There also needs to be training for ICPC cases. Contracts with Treatment Foster Care (TFC) require training and the same standards for home studies apply for TFC foster homes. For the past 12 years, there has been a Foster and Adoptive Parent Conference held in New Mexico. This year, these have been broken into two different events. Training for staff of State-licensed or State-approved facilities is required by the licensing agency and monitored by CYFD.

**d. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance in terms of the staff development and training system?**

Resources are needed to develop and deliver specialized training for relative foster homes. There is also a need for separate ICPC training; training for CSAs; and ongoing supervisor training. Training needs to be developed in placement and in-home services. Changes in policy, procedure, and practice need to be continually relayed to

staff of the Department's Professional Development Bureau, which is separate from Protective Services, in order to ensure that CORE and other training is comprehensive, current and accurate.

## **E. Systemic Factor: Service Array and Resource Development**

*The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency. (Item 35)*

*The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP. (Item 36)*

*The services in item 35 can be individualized to meet the unique needs of children and families served by the agency. (Item 37)*

### **1. Stakeholder Assessment**

As has been evident throughout the statewide assessment and the work of this Team, service array is New Mexico's largest challenge. It is simply not adequate and the Team assigned a rating of "2."

The Team's discussion focused on numerous issues and concerns that included the lack of an array in many areas of the State, particularly for behavioral health services, often as a result of sparse population; the difficulty in terms of accessing services; and the perception that providers are not paid adequately. They also discussed issues around providing services to increasing numbers of Spanish-speaking families and related issues of cultural competence. These factors accumulate and combine to serve as barriers to creating a safe home environment that allows children to remain safely at home and/or to help children in foster care achieve permanency.

Participants discussed the need to define what is meant by "basic behavioral health array." They also suggested that our concerns around service array should include non-clinical services such as housing, employment, financial assistance and other services to meet basic family needs. As in previous meetings to assess outcomes, they again pointed out that the State needs to provide telemedicine services and other creative ways to provide services.

Participants noted the critical need to focus on prevention, home visitation, early childhood services, subsidized maternity and family leave (especially with special needs infants and young children), and other early intervention programs.

Also identified were issues related to availability of services for transitioning youth and services available to Native American children served through Tribal Social Services rather than the state agency and district courts.

### **2. Factor Evaluation**

#### **a. What do policy and procedure require?**

Section 13 of General Policy requires that the provision of services be based upon the assessment of risk, needs, and strengths of the individual and the family and includes child protective services, independent living services, family services, domestic violence services, child care, foster care and adoption services.

Permanency Planning Policy requires that CYFD provide or arrange for services for the child and family as needed, with that need identified in the assessment plan and in the treatment plan and be reassessed at least every six months.

#### **b. Where was the child welfare system in Round One of the CFSR?**

New Mexico was found not in substantial conformity. Per the federal report, "Although basic services are in place, the findings of the review indicate that the service array is insufficient to meet the identified needs. Stakeholders reported erosion of the service array in recent years. Two of the three performance indicators under this systemic factor were determined to be areas needing improvement."

c. What are the strengths and promising practices that the child welfare system has demonstrated in terms of service array?

The process of identification of those children at risk of removal from their homes is the first step in providing pre-placement preventive services. In New Mexico, this process begins with Statewide Central Intake (SCI), a twenty-four hour, seven-day-a-week service that has screening capability, as well as information and referral sources for callers. SCI and the community based County Office Managers (COMs) provide prevention information to the community as a regular part of services provided. Workers and supervisors speak to community groups about identification of abuse and referral procedures. SCI workers receive over 80,000 calls each year. Approximately 60% of these calls are for the purpose of information and/or referral. SCI social workers use resource manuals to identify community-based services for callers. These services could include health and mental health providers, income support, shelters, food assistance, employment assistance, follow-up on open cases, juvenile justice and other services.

Investigations of child abuse and neglect are guided by the use of Structured Decision Making (SDM) instruments so that only those children who need to be removed from their families come in to custody. SDM instruments include the *Safety Assessment*, the *Risk Assessment* and the *Family Needs and Strengths Assessment*. The results of these instruments, in combination with the investigation finding, provide the structure for determining the level of intervention with the family. When there is low risk, families may be referred to community-based services. In addition to Structured Decision Making, reasonable efforts to prevent removal and to reunify children with their families are common practice in New Mexico.

The State selects services from the available array in order to meet the unique needs of children and their families. These services may include in-home services provided by the Department, family support, mid-level family preservation and time limited reunification services provided by Department contractors using Title IV-B part II funds, physical health and/or rehabilitative services supported through a combination of federal funding (Medicaid and Title XX) and state general funding Behavioral health services are provided through the Behavioral Health Purchasing Collaborative and administered by its "Single Entity", ValueOptions New Mexico. Services include:

- Mental health diagnostic evaluation;
- Behavior management;
- Individual, group and family therapies;
- Acute psychiatric residential treatment;
- Residential treatment;
- Therapeutic foster care;
- Substance abuse assessment and treatment; and
- Crisis services.

The State may also access services such as child care, mentoring for older youth, respite, transitional living services, education and training vouchers for youth, independent living services, and mediation to support children, youth and families in the state.

In terms of accessibility of services statewide, protective services intake, investigation, in-home and permanency planning are provided by the caseworkers in the county-based CYFD field offices. Offices are located in thirty-two of the State's thirty-three counties. Full time positions designated to staff each of these offices is in an approximate ratio to the population of the county. The services provided by direct staff are designed to be available and accessible on a statewide basis. CYFD's capacity to provide services is affected by its ability to recruit and retain staff. Historically, New Mexico has experienced difficulty in hiring and retaining staff. Throughout

the past several years, a number of activities were undertaken to address the issues of recruitment and retention, but staff vacancies remained at about 11% statewide, with some counties exceeding 25% at times.

In terms of contracted services (Title IV-B Part II Safe and Stable Families) and other types of services that comprise an effective service array, the greatest concentration and variety of services is located in and around the state's largest urban area. Highly specialized services are generally not available in rural areas of the state.

Of great significance has been the creation in statute in 2004 of the Behavioral Health Purchasing Collaborative. The Collaborative was designed to address some of the issues related to service array that were identified in Round One of the CFSP as well as in other state evaluations and assessments. The goal of the Collaborative is to develop and coordinate a single statewide behavioral health care system for the purpose of increasing services through better utilization of funding and coordination of services and providers. Beginning in 2005, the Collaborative aimed to address issues such as improved access to evidence-based care and coordination of public and private agencies and providers through a contract with one statewide entity, ValueOptions New Mexico, which was assigned to manage a single statewide provider network. In addition, the State successfully bid on and was awarded a federal Transformation Grant to improve access and services to the people of New Mexico.

**d. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance in terms of service array?**

Barriers related to the provision of services in support of safety, permanence, and well-being include the lack of behavioral health, substance abuse treatment and domestic violence services, long waiting periods to access services, lack of transportation to services especially in the more rural parts of the state, low rates of reimbursement to providers, and a lack of qualified and/or credentialed providers in all political jurisdictions in the state. Community services through informal networks and faith-based initiatives could be better utilized. In addition, the creation of the Behavioral Health Purchasing Collaborative and transition to the single statewide entity has been a difficult process, resulting in a deterioration in existing services and/or the availability of services. The transformation grant has been working across all state agencies to identify service gaps and to move the system away from residential-based services to community-based services. The Collaborative is initiating planning efforts to strategize on resources to allow for "bridge" services, so that consumers do not suffer during the transition from residential to community-based services.

## **F. Systemic Factor: Agency Responsiveness to the Community**

*In implementing the provisions of the CFSP, the State engages in ongoing consultation with tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP. (Item 38)*

*The agency develops, in consultation with these representatives, Annual Progress and Services Reports pursuant to the CFSP. (Item 39)*

*The State's services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population. (Item 40)*

### **1. Stakeholder Assessment**

New Mexico prides itself in terms of its long term and effective collaboration with numerous partners and stakeholders. The Team, however, saw opportunities to do even more and ended up concurring on a rating of "3."

The Team noted that there is ongoing consultation and collaboration with the requisite groups listed in Item 38. They also agreed that Annual Progress and Service Reports were developed. The CRB representatives

specifically commented on the responsiveness of the Agency and all participants noted that the Court Improvement Project (CIP) is the pinnacle of multi-stakeholder collaboration, producing numerous positive outcomes. However, they also suggested that not all Courts are involved with CIP, often because there are no specialized children's court judges in a given district, and more needs to happen to reach out to encourage the participation of these Courts. Judicial Officers and staff in these courts need to know more about what is going on. The CIP Best Practices initiative is one attempt to accomplish greater dissemination of information about innovative approaches and available resources.

While there is effective collaboration at the County level, it was noted that collaborative practice varied somewhat depending in part on the leadership of local Courts and Agency personnel. It was also pointed out that Statewide efforts are often hampered by the huge geographic distances people must travel to attend meetings and other events. Technology was suggested as one possible solution.

Efforts to coordinate with other federal or federally assisted programs are promoted to by the Behavioral Health Purchasing Collaborative (BHPC), but New Mexico's child welfare system still needs to do much more with education, housing, employment, and other programs.

## 2. Factor Evaluation

### a. What do policy and procedure require?

New Mexico Administrative Code requires and provides for a public comment and hearing process as a part of the adoption of any policies, regulations and state plan. The Agency maintains a constituency manager to receive and respond to all concerns and/or issues brought to the attention of the Department. The Department houses a Native American Liaison in the Office of the Secretary. Foster Parent liaisons are provided in the majority of county offices.

### b. Where was the child welfare system in Round One of the CFSP?

New Mexico was found to be in **Substantial Conformity**. Per the federal report: "NM CYFD has implemented procedures to solicit community responses to child welfare issues, however the review identified the State's process for developing annual reports of progress and services delivered pursuant to the CFSP in consultation with community representatives to be an area in need of improvement. Two of the three performance indicators were determined to be strengths."

### c. What are the strengths and promising practices that the child welfare system has demonstrated in terms of agency responsiveness?

CYFD engages in ongoing consultation with tribal representatives, consumers, service providers, foster care providers, the courts, and other public and private child- and family-serving agencies at the state level, regional level and local levels. At the Statewide level there are collaborative meetings on an on-going basis with tribal representatives coordinated by the Native American Liaison, and through meetings of the Court Improvement Project and its Committees. There are also numerous workgroups within and outside the Department on a variety of topics. At the Regional and local levels, there are meetings held at least quarterly to strengthen working relationships and provide quality services to families.

Efforts to coordinate with Tribes include not only the Native American Liaison, but also the Tribal-State Judicial Consortium and the eleven Joint Powers Agreements with Tribes. In addition, ICWA law is followed diligently. The New Mexico Children's Code requires that the Department assess each child's eligibility for enrollment as a member of an Indian Tribe when he/she first enters foster care. The Department documents the result of this assessment in the initial pleadings filed with the court. The New Mexico Children's Code also incorporates all ICWA requirements, requiring that petitions and other pleadings address ICWA requirements. The Code goes beyond ICWA in requiring that an Indian child placed in a foster, pre-adoptive, or adoptive placement shall be allowed to maintain his cultural ties and shall be permitted to participate in activities that strengthen cultural awareness.

Tribes are provided with written notice of all enrolled children who are placed in the custody of the Department. The Department and the Tribes coordinate and collaborate around issues of transfer to Tribal jurisdiction. The placement preferences for foster care and adoption outlined in ICWA are followed for every identified Native American child in the custody of the state. Finally, field staff meets regularly with Tribal ICWA staff at the local level to coordinate service delivery.

CYFD require that a determination as to whether a child is an American Indian is made on every child receiving services from the Agency. CYFD pursues enrollment on the child's behalf in recognized Tribes. CYFD provides training to all agency staff on ICWA and also collaborates with the Tribes and Pueblos on social services issues. The Agency provides technical assistance to Tribal social services agencies and provides program information and some funding to Native American social service agencies.

The Youth Advisory Team comprised of youth involved with protective services and/or juvenile justice services, individuals from public and private agencies serving youth, youth advocates, and CYFD staff meet regularly to develop and provide policy recommendations to the State. Through their most recent efforts, the State successfully implemented the extension of Medicaid for youth emancipating from the foster care system, as allowed by the Foster Care Independence Act. Services to children in foster care are also influenced by the recommendations of the New Mexico Youth Advocates, a board comprised of youth currently being served by or who have recently emancipated from the foster care system.

Through the Court Improvement Project, all stakeholders are engaged in improving outcomes to children and families. Efforts are specifically targeted to CFSR outcomes and include training and technical assistance, efforts to improve quality of representation, the development and promulgation of best practices, efforts to increase children's court specialization, and activities to improve data in pursuit of court performance measures.

In addition, most JJS, PS, and child care offices are now co-located, and joint meetings are held on a case-by-case basis, to provide quality services to families. Many offices have school liaison projects in which CYFD staff are assigned as liaisons within the schools to provide training, on-going communication, and collaboration. These activities comprise an effort by CYFD to strengthen social services/educational working relationships and provide better and more coordinated services to children.

CYFD is involved as a member of the Behavioral Health Purchasing Collaborative and of a number of the Collaborative Subcommittees. In addition, many Regional Managers and COMs participate in ValueOptions Local Stakeholder meetings in an effort to strengthen service array and provide more resources to families. TDM's have also strengthened collaborations with stakeholders by meeting to ensure that all available resources are provided to families. Ice Breakers have strengthened relationships between parents and foster care providers and have provided more positive outcomes for children as they enter foster care.

COM's meet at least quarterly with Judges and Attorneys together with CCA's to positively impact the local child welfare system and to maximize the role of the court. COM's are involved in local collaboratives to address methamphetamine use. COM's are involved in community collaborations and successful partnerships with Family Drug Courts in four counties. Many counties have school-based liaisons assigned to individual schools. These liaisons are available to the particular school for training, staffings on cases in common, and any other issues to improve outcomes for children and families. Foster parent liaisons are utilized in county offices to provide for on-going and open communications between staff and foster parents. Many, if not most, PS offices are now co-located with JJD and Child Care to maximize service delivery to families and to make accessing services easier. This also allows staff to work together for the benefit of families. There are also some counties where additional services are co-located such as Social Security, Division of Vocational Rehabilitation (DVR), Motor Vehicle, Workman's Comp, and others. As another example, in Santa Fe County there is a strong collaborative relationship with law enforcement. PS staff in Santa Fe County recently hosted a Law Enforcement Appreciation luncheon. Taos County has a liaison between CYFD and the local Domestic Violence Shelter.

In terms of Annual Progress and Services Reports pursuant to the CFSP, there are reports connected to the CFSP, IV-E, and Title XX. The State collects information through our involvement on a number of statewide committees including Court Improvement Project, Behavioral Health Purchasing Collaborative and Interagency

Coordinating Council. State plans are posted on the Agency's website, and the website provides for the ability to collect comments and feedback from the public. There are also quarterly and annual FACTS reports and an annual CRB report. The Department also holds public hearings on the development of state plans. Notice of public hearings is provided to social service and other agencies statewide and published in the *New Mexico Register*. The Department utilizes other opportunities to collect input on the state plans, such as the Annual Foster Parent Conference, quarterly meetings with Tribes, and the meetings of the CFSR statewide assessment team.

In terms of coordination with services or benefits from other Federal or federally assisted programs serving the same population, procedures are in place with Education, Social Security, the Aging and Long Term Services Department, the Behavioral Health Purchasing Collaborative, and various transition groups addressing federal and state housing and employment programs. Locally, COM's meet with other federal program staff to maximize service delivery to clients. TDMs include other federal program staff related to service provision, on a case-by-case basis.

d. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance in terms of agency responsiveness?

The lack of specialized children's court judges in many areas of the State makes it difficult to convene local collaboratives involving the courts, though COMs will nevertheless work with other community stakeholders. Other barriers relate to geography; it is difficult for people to travel long distances to the center of the State (Albuquerque) for meetings. In addition, we are a small state in terms of population, and there are only so many staff and officials from the various agencies to attend meetings. There is some interest in exploring opportunities to use technological advances to support collaborative efforts.

## G. Systemic Factor: Foster and Adoptive Parent Licensing, Recruitment, and Retention

*The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards. (Item 41)*

*The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds. (Item 42)*

*The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children. (Item 43)*

*The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed. (Item 44)*

*The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children. (Item 45)*

### 1. Stakeholder Assessment

The Team reviewed this factor and the relevant items and landed on a rating of "3."

Participants noted that we have foster care and childcare standards and that these are consistent with National standards. They also concurred that these standards are applied to all homes and institutions. Requirements for criminal background clearances are consistent with federal provisions, and case planning and other procedures provide for addressing safety in placement. One concern, however, is relative placements. Team participants recommended that with emergency placements, moving relative foster families to full licensure needs to happen as rapidly as possible. The Team was recalling data provided earlier in this process suggesting that when abuse

is found in foster care, it is at a somewhat higher rate with relatives. Overall, they suggested the application of more diligence with relative placements.

The Team discussed the need for more placement resources and supported the new efforts of the Department to enhance recruitment. They observed that TFC agencies now recruit foster homes and this limits the pool for regular foster care. They also noted that concurrent families who ultimately adopt are often removed from the pool. They reiterated recommendations for developing an array of foster homes as suggested in previous meetings and recommended this topic for PIP discussion.

Participants noted the difficulty in trying to recruit in rural areas and the overall complexity of serving as a placement resource, given travel and transportation demands to get to training, to take youth for services and visitation, *etc.* (They suggested the implementation of tele-training for foster parents.) Participants also emphasized the need to support foster parents as much as possible. Foster parent mentoring and foster parent support systems need to be expanded within the child welfare system. Satisfied foster parents could be instrumental in recruitment and training efforts, as well as in mentoring and support. Finally, it was noted that the system needs more Native American families, and other families that have the capacity to provide a culturally competent and language appropriate environment for children.

## 2. Factor Evaluation

### a. What do policy and procedure require?

Licensing Standards for Foster Care creates uniform standards for licensing of foster homes consistent with the Indian Child Welfare Act, ICPC, the Uniform Child Custody Act, and other applicable statutes, compacts and regulations.

The Child Placement Agency Licensing Standards requires that private placement agencies abide by the same standards as the Department in licensing foster or adoptive homes.

The Licensing Standards for Foster Care apply to all licensed or approved foster family homes, regardless of whether they are receiving IV-E or IV-B funds.

Permanency Planning Policy requires that all children placed in substitute care are placed in licensed/certified homes or facilities or approved relative homes.

Licensing Standards for Foster Care requires a criminal records check of all applicants and all adults residing in the home, to include a national criminal records check, a statewide check and a local police check.

Adoption Act Regulations sets out similar procedures for initiating a criminal background check for adoptive homes.

Foster Parenting policy requires CYFD recruit foster parents in all parts of the state and attempts to identify and locate relatives placement options, with emphasis on the needs of the child requiring out-of-home care.

CYFD procedures for adoptive family recruitment focus on developing a pool of potential adoptive homes, with an emphasis on identifying fit and willing relatives for consideration as part of that pool.

CYFD policies and procedures detail processes for accessing out-of-state placement resources for children.

### e. Where was the child welfare system in Round One of the CFSR?

New Mexico was found to be in **Substantial Conformity**. Per the federal report: "In New Mexico licensing standards for foster and adoptive homes have been implemented and were applied uniformly in both relative and non-relative homes. The State has maintained standards to assure the health and safety of children who are placed in care by the Department. The State is in compliance with Federal requirements for criminal background

clearances. Additionally there are on going efforts to recruit providers to meet the needs of children in substitute care in the State.”

c. What are the strengths and promising practices that the child welfare system has demonstrated in terms of foster and adoptive parent licensing, recruitment, and retention?

New Mexico Foster Care Licensing Standards and CYFD Protective Services Policy and Procedures establish and monitor standards for foster family homes. Licensing requirements include criminal background checks, abuse and neglect record checks, safety assessments, references, medical statements, review of the physical standards of the home, verifications (which includes employment, marriage, and divorce), training, and information obtained from personal interviews with applicants. The foster care licensing standards, adoption regulations and agency policies are compliant with the criminal records check required by ASFA. These policies are implemented by placement staff as part of the home study approval process. The criminal records check is completed on all applicants and must meet the policy and ASFA guidelines before final approval of an adoptive or foster home. Emergency foster care placements may be made with a relative by completing an abuse/neglect check and other assessments, prior to completion of the criminal records check. Final approval of the relative foster home for licensing requires completion of the criminal records check.

New Mexico Adoption Regulations and CYFD Policy and Procedures establish and maintain standards for adoptive homes. Licensing requirements for adoptive homes are consistent with licensing requirements for foster care and compliant with the provisions of the Adoption and Safe Families Act.

Child care institution licensing standards and regulations are established and maintained by CYFD. CYFD monitors compliance with those standards.

The Department, through the public hearing process, partners with private agencies and other professionals to develop and promulgate the foster care licensing standards, adoption regulations, and child care standards. Licensing Standards, Adoption Regulations and Child Care Institution regulations are available online. Policy and Procedures Bureau staff conducts annual reviews of licensing standards and regulations. Staff is available to provide technical assistance to other staff and the community.

It should also be noted that New Mexico has a single set of standards for foster home licensing and adoption approval for relative caregivers and non-relative caregivers. All applicants are required to complete all of the activities and components of the complete home study process in order to be licensed as a foster home or approved as an adoptive home. The only requirement that may be waived for a relative home is the space requirement, and that is considered on a case-by-case basis, and as they meet the needs of the child.

Placement workers review the suitability of every foster home licensed by CYFD at least twice a year. In addition, placement workers and staff of licensed private child placement agencies apply the provisions of the New Mexico Adoption Regulations throughout their work with adoptive families. Foster homes are reviewed annually for continued compliance with licensing standards at the time of licensing renewal. Child placement agencies are monitored for compliance with licensing requirements by annual reviews and site visits throughout the year. This process includes case record reviews.

Staff also monitors home studies for compliance with licensing standards and eligibility for Title IV-E funds. Placement supervisors review foster family and adoptive family records to ensure compliance with standards. IV-E staff reviews records to ensure compliance with eligibility standards. Policy and Procedures staff monitors private child placement agency records. Other CYFD staff monitors child care institutions. The multiple levels of staff throughout the child welfare system share responsibility for compliance with standards. This approach ensures comprehensive oversight. Applicants are afforded an administrative review process to ensure appropriate application of standards during the consideration of the foster and/or adoptive parent application.

CYFD is implementing a new home study process in February, 2007. SAFE is a set of home study tools for the psycho-social evaluation of prospective adoptive families, foster families, relative care providers, resource families, and concurrent planning families. SAFE results in a comprehensive home study report that clearly

documents the strengths and challenges that impact an applicant's ability to provide safe and appropriate care to children. SAFE provides tools to assist the home study practitioner in evaluating families. SAFE helps eliminate speculation from the evaluation process. SAFE also leads and supports the practitioner in applying sound social work practice to develop a complete view of families with all of their strengths, issues of concern, and challenges. As a result, SAFE provides the foundation for both a descriptive and a psycho-social evaluation. SAFE will assist New Mexico in creating a uniform and comprehensive home study process to ensure that the information gathered and assessed is relevant to "best interest" placement decision-making and ultimately enhances positive outcomes for children. SAFE was created in 1989 by the Consortium for Children (CFC) as a response to concerns about the variability and superficiality in the study of foster and adoptive parent applicants. Since its initial implementation in California, it has since evolved into a national model for family evaluation. Recently, CFC received a Federal Adoption Opportunities Grant from the Department of Health and Human Services, Administration for Children and Families to expand the usage of SAFE to seven other states and Indian tribes. New Mexico is pleased to be one of the states participating in this grant.

CYFD supports placements with relatives while consistently applying all licensing standards. Emergency placements may be made with a relative, once a safety assessment and abuse/neglect check have been satisfied. These placements are not eligible for Title IV-E funds until the relative foster parents complete and meet all of the licensing requirements.

Adoptive placements, including foster home conversions, are not made until all standards have been met. A placement may not convert to an adoptive placement until the foster parent meets all standards for adoptive placement.

**d. What are the casework practices, resource issues, and barriers that affect the child welfare system's overall performance in terms of foster and adoptive parent licensing, recruitment, and retention?**

In the last year or so, New Mexico has been experiencing a slight drop in the number of available foster and adoptive families, with a simultaneous increase in the number of children and youth in care. This has prompted the new recruitment campaigns discussed above. The general public may not be aware of the standards and how to access them. Additional training is needed for field staff. In addition, staff vacancies impact the ability of staff to meet timelines in every home study, and in instances of high staff vacancies, relative foster and adoptive homes and child specific home studies are given preference over non-relatives and general home study requests.

Foster Parent Liaisons are now functional in the majority of county offices and provide support and mentoring to foster parents. This directly impacts foster family retention. In many county offices foster parent liaisons visit foster homes within 24 hours of receiving a new placement to provide Medicaid cards, vouchers for clothing, and address any other basic needs that arise for new placements. Foster Parent Liaisons are also available to provide support when large sibling groups are placed together or when siblings have to be placed separately. Quarterly Foster Parent Meetings occur in county offices offering training in managing the behavioral challenges many children present as the result of their parent's drug use. These county-based training also provide a time for foster parents to share ideas and provide mentoring for one another. One county office has engaged the voluntary services of a therapist within the community to provide specific training to foster parents regarding behavior management strategies for children.

## V. STATE ASSESSMENT OF STRENGTHS AND NEEDS

1. Determine and document which of the seven outcomes and systemic factors examined during the Statewide Assessment are primarily strengths, citing the basis for the determination.

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

Based upon data presented in the State's Data Profile Permanency Composite 2 and 3, information obtained from focus groups, and review of agency policies/procedures, the area of Adoption is determined to be primarily strength for the Child Welfare System in New Mexico. In examining Permanency Composite 3, the State has identified a strength in achievement of permanency prior to their 18<sup>th</sup> birthday for children in foster care 24 months or longer. Systemic Factors such as the Case Review System, Quality Assurance System, and Foster and Adoptive Parent Licensing, Recruitment and Retention have enabled the State to exceed in this area. Areas to be explored during the on-site review include impact of concurrent planning on adoption case planning and the impacts of open adoption and mediation.

### Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.

Based upon information presented from the QA reviews and from the focus groups and a review of agency policies and procedures, efforts at placement with siblings is determined to be primarily a strength for the Child Welfare System in New Mexico.

### Child and Family Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.

Based upon information presented from the QA reviews and from the focus groups and a review of Agency policies and procedures, physical health of the child was determined to be primarily a strength for the Child Welfare System. Although primary health care appeared to generally be considered a strength, issues related to lack of dental providers were noted. Areas to explore during on-site review include noting access and availability to primary health care versus specialty care and the provision of dental care across urban and rural areas of the state.

### Systemic Factor 1: Statewide Information System

Based upon the State's Tier One SACWIS ranking and the availability of and utilization of data and management information reports by the Agency and within the State Self Assessment process, this systemic factor is determined to be primarily a strength for the Child Welfare System. The one item (requirement) is in place and functioning as required.

### Systemic Factor 2: Case Review System

Based upon a review of information and data available from the Agency's management information system, the QA reviews, the Citizen Review Boards and the focus groups, this systemic factor is determined to be primarily a strength for the Child Welfare System. Areas to examine during the on-site review include impact of Family Drug Courts on Safety, Permanency and Well-being outcomes and determination of current practice related to "commence and continue" for adjudicatory hearings. The five items (requirements) are in place and function at the level described in each requirement.

### Systemic Factor 3: Quality Assurance System

Based upon a review of the multiple quality assurance processes in placement within the Child Welfare System and the State's use of data and information to made decisions, this systemic factor is determined to be primarily a

strength for the Child Welfare System. The two items (requirements) are in place and functioning at the required level.

#### **Systemic Factor 6: Agency Responsiveness to the Community**

Based upon the information received from the focus groups and a review of Agency policy/procedures and practices, this item is determined to be primarily a strength for the Child Welfare System. The three items (requirements) are in place and no more than one fails to function at the level described in each requirement.

#### **Systemic Factor 7: Foster and Adoptive Parent Licensing, Recruitment, and Retention**

Based upon the information received from the focus groups and a review of Agency policy/procedures and practices, this item is determined to be primarily a strength for the Child Welfare System. Areas to examine during the on-site self assessment include the needs for specific training/support for relative foster parents. The five items (requirements) are in place and no more than one fails to function at the level described in each requirement.

2. Determine and document which of the seven outcomes and systemic factors examined during the Statewide Assessment are primarily areas needing improvement, citing the basis for the determination. Identify those areas needing improvement that the State would like to examine more closely during the onsite review. Prioritize the list of areas needing improvement under safety, permanency, and well-being outcomes.

#### **Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.**

Based upon the review of the State's Data Profile, QA data and information obtained from Citizen Review Reports and focus groups, the following were identified as areas needing improvements: Timeliness of Initiating Investigations of Reports of Child Maltreatment (Item 1); Repeat Maltreatment (Item 2), Absences of Recurrence of Maltreatment (data indicator); Absence of Maltreatment in Foster Care (data indicator).

Areas to examine during the on-site review:

- Identifying the impact of state law providing for law enforcement to place children directly into the custody of the Agency, in terms of impacting reported repeat maltreatment levels in New Mexico;
- Targeted use of In-Home Services for those children coming into custody through emergency law enforcement custody;
- Examining recurrence of maltreatment in terms of differences in substantiation rates. For example, Bernalillo county's substantiation rate = 19.2%; Santa Fe's substantiation rate = 22.6% and Lea county's substantiation = 30.8%;
- Examining workload/caseload statewide, in terms of the Agency ability to respond to Emergency, Priority One and Priority Two reports in different locations;
- Examination of the use of relative foster care and the incidence of maltreatment in foster care; and
- Examination of whether Team Decision Making process can effectively and positively impact repeat maltreatment.

#### **Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.**

Based upon the review of QA data and information from the Citizen Review Report and focus groups, services to family to protect child(ren) in the home and prevent removal or re-entry into foster care; and risk assessment and safety management for in-home services cases were identified as areas needing improvement.

Areas to examine during the on-site review:

- Identifying the impact of state law providing for law enforcement to place children directly into the custody of the agency in terms of impacting reported re-entry into foster care levels in New Mexico; and

- Review safety management practices in in-home services cases.

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

Based upon a review of the State's Data Profile, information from the QA review, management information system reports, information from the Citizen Review reports and information from the focus groups foster care re-entries, stability of placement, reunification and planned permanent living arrangement were identified as areas needing improvement.

Areas to examine during the on-site review:

- Consideration of how the 30% increase in caseload since the first round of CFSR has impacted permanency outcome 1;
- Consideration of how lack of services and/or access to services has impacted placement stability across all lengths of time in care and further, to examine the differences in the rural versus urban areas of the state in terms of provision of services;
- Examination of whether Team Decision Making process can effectively and positively impact permanency and stability; and
- Examination of the role of Youth Attorneys in involving youth in case planning and the impact of permanency and stability for youth with a plan of "planned permanent living arrangement."

**Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.**

Based upon a review of information from the QA reviews, information from the management information system, information from the Citizen Review reports and information from the focus groups, proximity of foster care placement (especially in relationship to children/youth with higher end needs), visiting with parents and siblings in foster care, preserving connections, relative placements (in terms of identifying and accessing paternal relatives) and relationship of child in care with parents were identified as areas needing improvement.

Areas to examine during the on-site review:

- Consideration of how the 30% increase in caseloads since the first round of CFSR has impacted permanency outcome 2;
- Examination of whether Team Decision Making process can effectively and positively impact family relationships and support the preservation of connections for children.
- Examination of differences between maternal and paternal factors in terms of achievement of this item; and
- Examination of and identification of culturally relevant services/approaches that need to be used to maintain appropriate family connections.

**Child and Family Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.**

Based upon a review of the information from the QA reviews, information from the Citizen Review reports and information from focus groups, needs of the parents (especially in terms of fathers), child and family involvement in case planning (in terms of effectively engaging youth and families involved in in-home services), caseworker visits with the child (in terms of quality of the visitation) and caseworker visits with the parents (in terms of quality of the visitation) were identified as areas needing improvement.

Areas to examine during the on-site review:

- Consideration of how 30% increase in caseloads since the first round of CFSR has impacted well-being outcome 1;
- The role of the Youth Attorney to ensure and support the youth's active involvement in case planning;

- Consideration of how lack of services and/or access to services has impacted item 17 factors ,specifically in terms of accessing services for parents and children and the differences in the rural versus urban areas of the state;
- Examination of whether Team Decision Making process can effectively and positively impact well-being in terms of the strategy to increase family engagement and promote family involvement case planning; and
- Examination of the effectiveness of Family Drug Court in assessing and meeting needs of children and families.

**Child and Family Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.**

Based upon a review of information from the QA reviews and information from the focus groups the educational needs of the child is rated as an area needing improvement. Concerns noted were primarily around school continuity associated with placement stability and the child welfare system’s difficulty in accessing and engaging the educational system in order to meet the needs of the child. Educational needs typically are addressed outside the formal educational system through tutoring and/or efforts of foster parents.

Areas to examine during on-site review:

- Consideration of how courts and CASAs might be able to improve this outcome; and
- Examine the effectiveness of school liaisons in Bernalillo and Santa Fe counties.

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**Child and Family Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.**

Based upon a review of information from the QA reviews, information from the Citizen Review Report and information from the focus groups, this outcome is rated as an area needing improvement based upon Systemic factor 5: Service Array failing to function at the level described in each requirement. Issues primarily discussed and identified focused on the behavioral health needs of children and families. Concerns were raised about the lack of community-based services for children, families and foster families.

Areas to examine during the on-site review:

- Examine how the lack of services and/or delays in accessing services impacts placement stability;
- Examine the use of psychotropic medication for children in foster care; and
- Evidence of the use and effectiveness of telehealth/telemedicine technology.

#### **Systemic Factor 4: Staff and Provider Training**

Based upon the information obtained from QA reviews and from the focus groups, it was determined that while the State is operating a staff development and training program that supports the goals and objects in the CFSP through provision for initial and ongoing training for staff and provision of training for current and prospective foster parents, adoptive parents and staff of the State’s child placement agencies, that the items are not functioning at the optimal level described in each requirement. For example, initial and ongoing training for in-home services and placement staff were not determined to be adequate to meet the needs of the child welfare system. Foster/adoptive training in a language other English (primarily Spanish) was not readily available; specialized training/support for relative foster parents was identified as a need, and training on CFSR outcomes was identified as a need for Title IV-B part II providers.

#### **Systemic Factor 5: Service Array and Resource Development**

Based upon information obtained from the State Data Profile, the QA reviews, the Citizen Review Report and the focus groups, this item was determined to be an area needing improvement. The determination was made based

upon the assessment that an insufficient array of services exists to create a safe home environment that allows children to remain safely at home and/or to help children in foster care achieve permanency. Services are not accessible in all political jurisdictions covered in the State's CFSP, as there are differences in service provision between the State's largest urban area and the rest of the state. Issues related to availability of services for transitioning youth and services available to Native American children served through Tribal Social Services rather than the state agency and district courts were also identified as issues needing further review.

### 3. Recommend two additional sites for the onsite review activities

The process for recommending two additional sites for the onsite review activities was restricted, based upon the availability of an adequate foster care sample that would provide the four types of foster care cases. It was further limited by the federally imposed restriction that did not allow for the inclusion of in-home cases where there was an emergency temporary custody and no petition filed, as considered for inclusion in the in-home case sample. This restriction and the 8-day rule now being applied to the calculation of a number of the composite measures remains troubling to the State. This is because New Mexico's "48 hour hold" is a significant feature within our Child Welfare System that will not be examined/considered in this round of the CFSP. The State's data profile and the on-site review is therefore an incomplete assessment of the Child Welfare System in New Mexico of the full scope and broader purpose of this State's child welfare system.

Santa Fe and Lea Counties were recommended and approved as the additional sites. The following table and accompanying narrative (previously provided to DHHS-ACF CB) provide the foundations for the recommendation.

## COUNTY-BASED COMPARISON TO SUPPORT SITE SELECTION

COUNTY	SUFFICIENT FOSTER CARE SAMPLE	SUFFICIENT IN-HOME CASE LOAD(1)	IV-B PART II CONTRACTOR (3)	SUBSTANTIATION RATE (4)	6 MO. ABSENCE OF RECURRENCE OF MALTREATMENT	% REUNIFY <12 MONTHS	% REENTER < 12 MONTHS	% ADOPTION < 24 MONTHS	% ≤2 PLACEMENTS < 12 MO.	CHILD IN CARE COMPARED TO POP. (5) F M	HISPANIC POP. IN CARE (6)	AFRICAN AMERICAN POP. IN CARE (7)	NATIVE AMERICAN POP. IN CARE (8)	TRIBE OR PUEBLO IN COUNTY	# CHILDREN PER WORKER (9)
Bernalillo	Yes	Yes	FPS TLR FS Adoption	19.2%	90.8%	56.6	12.4	34.2	77.8	3.0 2.9	57.7/52.4	8.9/4.0	13.7/5.5	No	14
Chaves	Yes	No	FPS FS TLR	38.0%	89.4%	70.5	5.7	52.6	76.3	9.9 10.8	72.2/58.5	5.6/2.7	3.0/1.3	No	35
Dona Ana	Yes	Yes	FPS FS TLR Adoption	21.2%	87.5%	73.9	12.4	16.7	73.6	3.2 3.3	66.7/75.4	5.8/2.4	0.5/1.6	No	29
Grant	Yes	No	FS FPS TLR	17.5%	91.1%	58.8	11.5	46.2	81.1	8.5 8.4	73.6/60.0	0.0/1.4	0.0/1.5	No	24
Lea	Yes	Yes	None	30.8%	90.1%	52.5	28.6	27.3	82.7	5.4 6.0	47.6/53.6	7.8/5.6	1.9/0.9	No	23
Rio Arriba	Yes	Yes (2)	None	34.4%	92.8%	75	23.3	55.0	80.4	6.3 5.1	77.8/76.5	16.7/0.7	2.8/17.9	Yes	18
San Juan	Yes	No	FS TLR FPS	24.3%	91.5%	62.2	17.3	20.0	78.4	4.6 5.6	23.1/17.7	3.7/0.6	34.7/45.3	Yes	25
Santa Fe	Yes	Yes	FS	22.6%	90.1%	70	7.6	34.1	85	3.0 2.6	67.0/61.1	3.1/1.0	5.2/4.2	Yes	11
San Miguel	Yes	Yes	None	24.1%	96.8%	88	12.5	37.5	88.4	9.1 8.0	86.8/83.6	7.9/1.5	1.3/2.2	No	16

(1) In-Home cases reviewed. Cases involving either 48-hour emergency custody and/or any custody episode during PUR excluded from the sample;

(2) One worker carried all cases during sample period;

(3) FS – family support; FPS – midlevel family preservation services; TLR – time limited reunification; Adoption – adoption promotion/support ;

(4) State substantiation rate = 23.5%;

(5) Rate per child population 1000. State average females rate per 1000 = 4.3; State average male rate per 1000 = 4.2;

(6) Percent of children in foster care population identified as Hispanic compared with New Mexico 2002 population estimates for % of children in the county identified as Hispanic;

(7) Percent of children in foster care population identified as African American with US census bureau data for % of children in county identified as African American;

(8) Percent of children in foster care population identified as Native American with US census bureau data for % of children in county identified as Native American;

(9) Based on point-in-time child in care and number of positions in county. Does not account for vacant positions.

NEW MEXICO  
2<sup>ND</sup> ROUND CFSR ON-SITE REVIEW SITES  
State Self Assessment Team Recommendations

- Considered Bernalillo County: Bernalillo was selected as a site based on meeting regulatory requirement for inclusion of largest urban area, sufficiency of in-home sample, use of Team Decision Making at custody and change of placement decisions, basic service array structure in place, and strong relationship with courts; representativeness of county to statewide practice somewhat limited by child to worker ratio (low for state), turnover and vacancies impacts, larger number of emergency custodies impacting placement and reunification, and number of urban Native American children in caseload. Selected by team.
  - Considered Chaves County. In-home sample is not sufficient in Chaves due to vacancies, incidence of emergency custody, and/or children otherwise coming into custody during PUR; neighboring counties assessed to possibly supplement in-home sample needs but numbers too low. In terms of representativeness, service array, caseload issues, and many safety and permanency measures similar to other prospective rural sites; however higher than state average substantiation rate and lower re-entry rate attributed to higher % of children over all in foster care. Similar caseload issues could be examined in other prospective sites. Over representation of Hispanics in foster care population warrants additional exploration. Not selected by team.
  - Considered Dona Ana County. In-home sample sufficient; challenges include absence of repeat maltreatment rate, adoption within 24 months rate, and over representation of Hispanics in foster care populations; issues concerning adoptions related to court practice. Most issues could be observed/explored at other potential sites and county was selected in first round of CFSR. Not selected by team.
  - Considered Grant County. In-home sample is not sufficient in Grant due to vacancies, incidence of emergency custody, and/or children otherwise coming into custody during PUR; neighboring county (Dona Ana) could supplement the sample, however the two counties are different in terms of rural nature, service array, demographics, and other measures. Most issues (i.e., drug court) could be observed/explored at other potential sites and sampling issues not resolvable. Not selected by team.
  - Considered Lea County. Both foster care and in-home sample appear sufficient; service array issues could be examined, for example, no IV-B part II providers and presence of program specialized in serving youth; County also experiencing significant growth related to oil and gas and gambling. Issues identified for further examination include safety and permanency related indicators (not normative for the state), drug court, case loads, and over representation of African Americans (without over representation of Hispanic families). Selected by team.
  - Considered Rio Arriba County. Both foster care and in-home sample appear sufficient, however in-home services provided by one worker therefore creating over representation of worker in potential sample. County concerns/issues/characteristics similar to other potential samples. Not selected by team.
  - Considered San Miguel County. Both foster care and in-home sample appear sufficient; County concerns, issues, and characteristic similar to other potential sites; however, inadequate opportunity to consider services to Native American children/families based on population demographics. Not selected by team.
  - Considered Santa Fe County. Both foster care and in-home sample appear sufficient. County concerns, issues, and characteristics similar to other potential sites. Issues warranting further consideration include service array, lack of foster homes, caseload issues as a result of vacancies/turnover, and relationships with pueblos. Selected by team.
4. Provide comments about the State's experience with the Statewide Assessment Instrument and process.

The realignment of the Statewide Assessment Instrument to mirror the case review instrument and the final report is an improvement over the previous round of CFSR.

New Mexico suggests expanding the time frame between the state’s receipt of state data profile and initiation of the state self-assessment, to allow for the Team to have the opportunity to address data issues that might only become apparent after the creation of the data profile. This is especially pertinent when the national measures are newly adopted and the nuisances of each state’s data management system have not been tested to determine applicability. States have developed and designed their data management system to fulfill SACWIS requirements and not necessarily for the purpose of developing state data profiles that cross multiple reporting periods

Changing state data profiles and federal processes during the self-assessment period also presented certain challenges for the state team. It is recommended that methods be finalized so as not to create the sensation of a “moving target” for the state.

Finally, the state suggests additional clarity and instruction regarding the documentation expectations. The expectation that the Statewide Self Assessment be approximately 75-85 pages is incongruent with the nature of information requested in the instructional document. For example, Section III in the document, which provides an outline for the relevant exploratory issues to be addressed in the assessment is approximately 46 pages. Even by limiting responses to two pages, the resulting document exceeds the page limit expectations.

5. Provide the names and affiliations of the individuals who participated in the Statewide Assessment process; please also note their roles in the process.

NAME	AFFILIATION	ROLE
Angela Adams	CYFD Protective Services Director	State Self Assessment Team
Maryellen Bearzi	CYFD Protective Services Administrative Deputy Director	State Self Assessment Team
Romaine Serna	CYFD Protective Services Deputy Director	State Self Assessment Team
Francine Anaya	CYFD Protective Services Deputy Director	State Self Assessment Team
Simon Romo	CYFD Protective Services	State Self Assessment Team
Rebecca Liggett	CYFD Protective Services	State Self Assessment Team
Nora Buchanan	CYFD QA Administrator	State Self Assessment Team
Retta Prophet	CYFD Protective Services, Research and Evaluation Bureau Chief	State Self Assessment Team
Julienne Smrcka	CYFD Office of the Secretary African American Program Manager	State Self Assessment Team
Jared Rounsville	CYFD Protective Services Youth Services Bureau Chief	State Self Assessment Team
Brenda Manus	CYFD Protective Services AART	State Self Assessment Team
Craig Sparks	CYFD Juvenile Justice	State Self Assessment Team
Kim Cobbs	CYFD Family Services	State Self Assessment Team
Kathy Spurgin	Administrative Office of the Courts, CIP Grants Manager	State Self Assessment Team
Judge John Romero	District Court Judge, Second Judicial District	State Self Assessment Team
Cristen Connelly	Respondent Attorney	State Self Assessment Team
Tara Ford	Guardian Ad Litem	State Self Assessment Team
Liz McGrath	Youth Attorney	State Self Assessment Team
Gini Silva	Advocacy, Inc.	State Self Assessment Team

Brian O'Connell	NM CASA Network	State Self Assessment Team
Marie Aberant	NM CASA, Seventh Judicial District	State Self Assessment Team
Pat Briggs	CRB	State Self Assessment Team
Corinna Hansen	CRB	State Self Assessment Team
Judy Flynn-O'Brien	Children's Law Center	State Self Assessment Team
Erin L. Hourihan	Provider Alliance, Child Haven	State Self Assessment Team
Anna Marie Luna	Hogares, Inc.	State Self Assessment Team
Carol Watts	Value Options New Mexico	State Self Assessment Team
Dr. Chris Carson	Value Options New Mexico	State Self Assessment Team
Steve Lloyd	Foster Parent	State Self Assessment Team
Kevin and Mary Koop	Foster Parents	State Self Assessment Team
Polly Arango	Algodones Associates	State Self Assessment Team
Teresa Berry	Children's Court Mediation	State Self Assessment Team
Susan Lancaster	New Mexico Public Education Department	State Self Assessment Team
Felicia Griffin	New Mexico Voices	State Self Assessment Team
Andrew Gomm	Department of Health, FIT Program Manager	State Self Assessment Team
Lisa H. Olewine	New Mexico Adoption Alliance	State Self Assessment Team
Chief Ted Branch	New Mexico State Police	State Self Assessment Team
Dr. Andrew His	Focus Program	State Self Assessment Team
Dr. Sally Kroner	Human Services Department	State Self Assessment Team
Gerald McBride, Attorney at Law	Aging and Long Term Services Division	State Self Assessment Team
Ruthie H. Dearing	CYFD Family Services	State Self Assessment Team
Shelly Bucher	New Mexico State University	State Self Assessment Team
Sarah Boone	New Mexico State University Foster Parent	State Self Assessment Team
Margaret M. Aragon de Chavez	CYFD Protective Services Recruitment	State Self Assessment Team
Sbicca Brodeur	Department of Health, FIT Program	State Self Assessment Team
Bapu Goddanti	CYFD Protective Services Research and Evaluation	State Self Assessment Team
Don Holden	CYFD Protective Services SE Regional Manager	State Self Assessment Team
Linda McNall	CYFD Protective Services NE Regional Manager	State Self Assessment Team
Linda Aspenwind	New Mexico ICWA Association	State Self Assessment Team
Deborah Martinez	CYFD CFSR Coordinator	State Self Assessment Team
Mary Ann Shaening	Shaening & Associates	State Self Assessment Team
Sandra Wechsler	Shaening & Associates	State Self Assessment Team
Maurice A. McAlister	CYFD Protective Services	State Self Assessment Team
Andrea Poole	CYFD Protective Services Policy, Training & Federal Programs Bureau Chief	State Self Assessment Team
Beverly Naumberg	La Familia, Inc. Executive Director	State Self Assessment Team
Carlos Quezada-Gomez	CYFD Children's Health Program Manager	State Self Assessment Team
Patricia Ramsey	Department of Health	State Self Assessment Team
Mark J. Ruttkay	CYFD Foster Care Manager	State Self Assessment Team
Teresa Larson	CYFD Protective Services Bureau Chief	State Self Assessment Team
15 Youth	CYFD Foster Children	Youth Focus Groups

192 Foster Parents	CYFD Foster Parents and Treatment Foster Care Parents	Foster Parent Focus Groups
Venus Montoya-Felter	Nambe Pueblo	Native American Focus Group
Bernie Teba	CYFD Native American Affairs Liaison	Native American Focus Group
Rochelle G. Apodaca	Bureau of Indian Affairs	Native American Focus Group
Nancy Evans	Navajo Pueblo	Native American Focus Group
Judge William Johnson	Laguna Pueblo	Native American Focus Group
Brian Coriz	San Felipe Pueblo	Native American Focus Group
Jolene Natewa	CYFD Protective Services County Office Manager	Native American Focus Group
Deseree Weekoty	Coalition to Stop Violence Against Native Women	Native American Focus Group
Evone Martinez	Coalition to Stop Violence Against Native Women	Native American Focus Group
Lynn Hanks	Mescalero Apache Tribe	Native American Focus Group
Becky Ballantine	CYFD Juvenile Justice Native American Liaison	Native American Focus Group
Ron Reid	Department of Health	Native American Focus Group
Lorenzo Shaw	Navajo Nation	Native American Focus Group
Connie Gould	Isleta ICWA Parent Pride	Native American Focus Group
Judge Paul Tsosie	Santa Clara Pueblo Tribal Court	Native American Focus Group
Rita Jojola-Dorame	Pueblo of Tesuque	Native American Focus Group
Judge Joseph G. Najanjo	Santa Clara Pueblo Tribal Court	Native American Focus Group
Christopher Witt	Laguna Pueblo	Native American Focus Group
Leslie Lopez	Laguna Pueblo	Native American Focus Group
Darlene Valencia	Pueblo of San Felipe	Native American Focus Group
Melissa Candelaria	New Mexico Indian Affairs Department	Native American Focus Group
Judge Marilyn Crelier	Pueblo of Taos Tribal Court	Native American Focus Group
Norma Jean Romero	Pueblo of Taos Tribal Court	Native American Focus Group
Rita Sage	Mescalero BIA Social Services	Native American Focus Group
Regina Wilson	Navajo Children and Family Services	Native American Focus Group

Rebecca Quam	Pueblo of Zuni	Native American Focus Group
Cynthia Gachupin	Pueblo of Jemez	Native American Focus Group
Terri Tapia	Pueblo of Tesuque Head Start	Native American Focus Group
Jane Jackson Bear	Pueblo of Santa Ana Social Services	Native American Focus Group
Ramona Carrillo	Pueblo of Laguna Social Services	Native American Focus Group
David Montoya	CYFD Protective Services NW Regional Manager	Native American Focus Group
Mikki Carlow	First Nations Community Health Source	Native American Focus Group
Gloria K. King	First Nations Community Health Source	Native American Focus Group
Judge Verna Teller	Isleta Tribal Court	Native American Focus Group
Judge Peggy Bird	Isleta Tribal Court	Native American Focus Group
Judge Cynthia Fry	New Mexico Court of Appeals	Judges Focus Group
Judge Barbara J. Vigil	First Judicial District Court	Judges Focus Group
Justice Petra Jimenez Maes	New Mexico Supreme Court	Judges Focus Group
Judge James Count	Twelfth Judicial District Court	Judges Focus Group
Judge Thomas A. Rutledge	Fifth Judicial District Court	Judges Focus Group
Judge Sandra Price	Eleventh Judicial District Court	Judges Focus Group
Judge Charles C. Currier	Fifth Judicial District Court	Judges Focus Group
Hearing Officer Charles C. Kreter	Sixth Judicial District Court	Judges Focus Group
Judge Henry Quintero	Sixth Judicial District Court	Judges Focus Group
Judge Jane Shuler Gray	Fifth Judicial District Court	Judges Focus Group
Judge Abigail Aragon	Fourth Judicial District Court	Judges Focus Group
Judge L. E. DePauli	Eleventh Judicial District Court	Judges Focus Group
Judge M. Monica Zamora	Second Judicial District Court	Judges Focus Group
Judge Marie Baca	Second Judicial District Court	Judges Focus Group
Judge Lisa C. Schultz	Third Judicial District Court	Judges Focus Group

Judge Fernando R. Macias	Third Judicial District Court	Judges Focus Group
Judge Camille Martinez-Olguin	Thirteenth Judicial District Court	Judges Focus Group
Judge Violet Otero	Thirteenth Judicial District Court	Judges Focus Group
Judge John Davis	Thirteenth Judicial District Court	Judges Focus Group
Virginia Villarreal	CYFD Protective Services	Internal CYFD Focus Group
Christine Archuleta	CYFD Protective Services	Internal CYFD Focus Group
Sheila Smith	CYFD Protective Services	Internal CYFD Focus Group
Matthew Rael	CYFD Protective Services	Internal CYFD Focus Group
Marcia Medina	CYFD Protective Services	Internal CYFD Focus Group
Delia Garcia	CYFD Protective Services	Internal CYFD Focus Group
Michelle Herrera	CYFD Protective Services	Internal CYFD Focus Group
Bart Sandoval	CYFD Protective Services	Internal CYFD Focus Group
Lisa Madrid-Schleicher	CYFD Protective Services	Internal CYFD Focus Group
Brenna Dotson	CYFD Protective Services	Internal CYFD Focus Group
Linda Cravens-Rodriguez	CYFD Protective Services	Internal CYFD Focus Group
Robin Yoder	CYFD Protective Services	Internal CYFD Focus Group
Sharon Cosentino	CYFD Protective Services	Internal CYFD Focus Group
Donald Stage	CYFD Protective Services	Internal CYFD Focus Group
Marsha Buesgens	CYFD Protective Services	Internal CYFD Focus Group
Nick Dagonos	CYFD Protective Services	Internal CYFD Focus Group
Angelina Unale-Hale	CYFD Protective Services	Internal CYFD Focus Group
Cory McCarrell	CYFD Protective Services	Internal CYFD Focus Group
Vicky Cobb	CYFD Protective Services	Internal CYFD Focus Group
Patty M. Saylor	CYFD Protective Services	Internal CYFD Focus Group
Tom Cassidy	CYFD Protective Services	Internal CYFD Focus Group
Kelly Robbins	CYFD Protective Services	Internal CYFD Focus Group

Kasandra A. Gandara	CYFD Protective Services	Internal CYFD Focus Group
Richard Anderson	CYFD Protective Services	Internal CYFD Focus Group
Valree S. Lopez	CYFD Protective Services	Internal CYFD Focus Group
Audra Salas	CYFD Protective Services	Internal CYFD Focus Group
Barbara Morgan	CYFD Protective Services	Internal CYFD Focus Group
Julie Bodenner	CYFD Protective Services	Internal CYFD Focus Group
Nichole C. Garcia	CYFD Protective Services	Internal CYFD Focus Group
Georgia A. Sanchez	CYFD Protective Services	Internal CYFD Focus Group
William D. McDougal	CYFD Protective Services	Internal CYFD Focus Group
Roland Trujillo	CYFD Protective Services	Internal CYFD Focus Group
Dallas L. Rychener	CYFD Protective Services	Internal CYFD Focus Group
Delia Garcia	CYFD Protective Services, Research and Evaluation Unit	Data and Research Support
Marcia Medina	CYFD Protective Services, Research and Evaluation Unit	Data and Research Support