

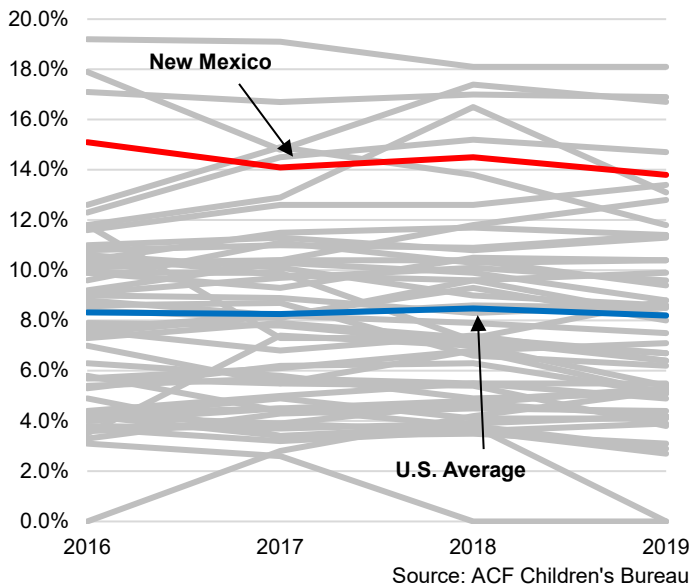


Topic Area: Repeat Child Maltreatment

Over the long-term, child maltreatment causes physical, psychological, and behavioral consequences leading to increased costs to the child welfare, behavioral health, and physical health care systems. The Centers for Disease Control and Prevention estimate the lifetime cost of nonfatal child maltreatment at \$831 thousand. Additionally, the consequences when children experience repeat maltreatment are potentially devastating. However, New Mexico consistently ranks among the top six states for repeat maltreatment occurring within 12 months of an initial allegation. There are several evidence-based options to reduce repeat maltreatment that could be expanded and leveraged to garner more federal revenue and improve outcomes.

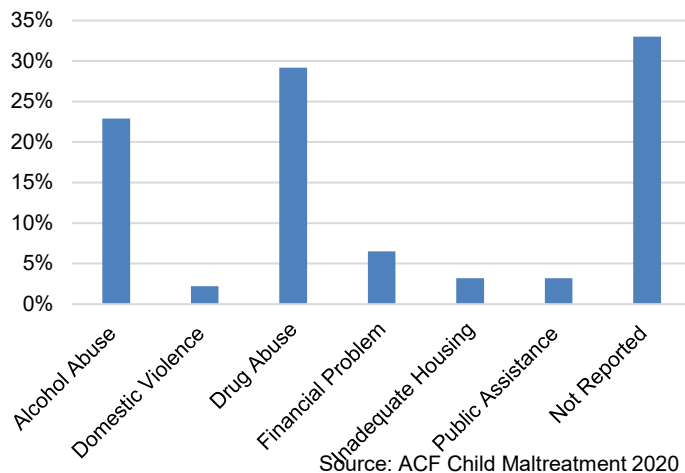
Key Data

12-Month Repeat Maltreatment

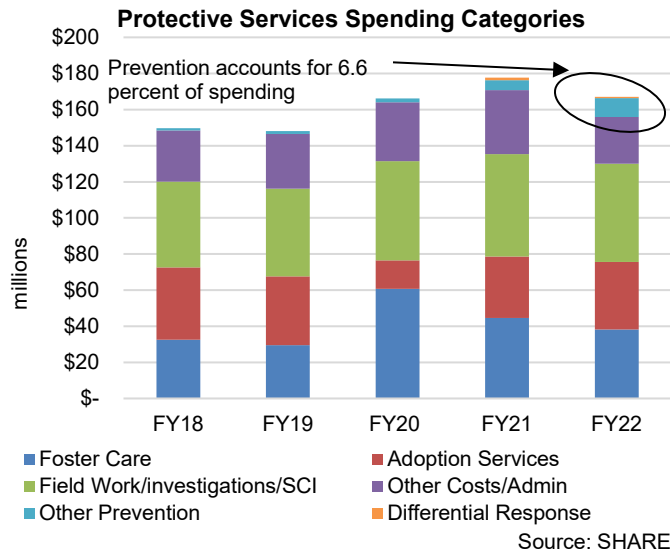


- New Mexico is consistently among the poorest performing states when it comes to repeat child maltreatment.
- High poverty rates, complex family needs (such as substance use, domestic violence, unmet mental health needs, and unstable housing), lack of services, and poor recruitment and retention have all been cited by the Children, Youth and Families Department as obstacles to reducing maltreatment to a rate closer to the national average.

New Mexico Child Victims with Caregiver Risk Factors 2020

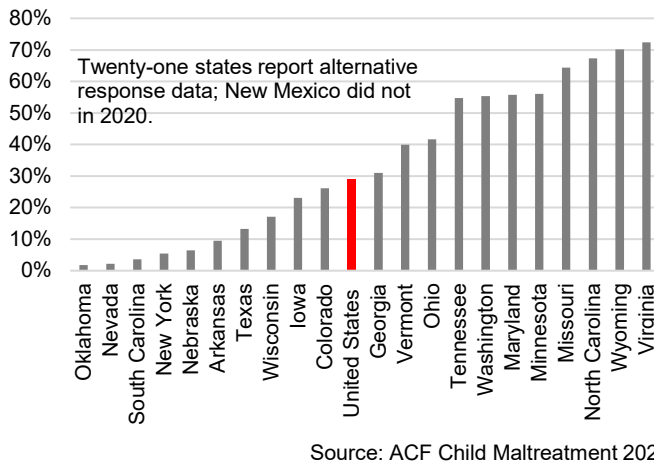


- By far the two leading caregiver risk factors for child maltreatment are alcohol and drug use.
- In 2019, New Mexico enacted legislation to coincide with the federal Comprehensive Addiction and Recover Act plans of safe care, requiring healthcare providers that observe newborn drug exposure or fetal alcohol spectrum disorder to develop a plan of safe care before discharging to the caregivers of newborns.
- Targeting prevention services at families with alcohol and drug use is likely to have the greatest impact.



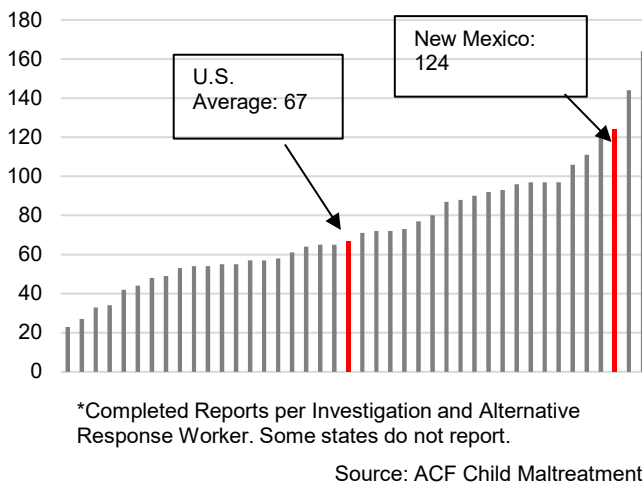
- Spending on prevention within the Protective Services Program was about 6 percent of total expenditures in FY22, but the amount has grown significantly since FY18.
- In FY22 and FY23, the Legislature reinvested savings from smaller foster care caseloads into prevention services totaling \$5.7 million.
- The federal government enacted the Families First Prevention Services Act in 2018, allowing states to use Title IV-E funds for prevention services. New Mexico submitted its plan in September, and it is pending approval.

Of Children Receiving a CPS Response Such as an Investigation, Percent Receiving an Alternative Response in 2020*



- The use of alternative response is widespread nationally with 21 states in 2020 reporting alternative response data to the federal government.
- New Mexico did not report this data because its alternative response pilot, known as Family Outreach and Community Engagement (FORCE), did not start until 2021.

National Caseloads of Investigations and Alternative Response Workers 2020*



- Chronic workforce shortages plague just about every area of New Mexico's child welfare system, including social workers, caseworkers, investigators, and other workers in the service provider network.
- To address these shortages, the Legislature appropriated \$20 million to CYFD and HSD to develop more behavioral health provider capacity and \$50 million to higher education institutions to increase social worker teaching faculty endowments to expand programs and graduates.

Performance Challenge: Preventing Repeat Child Maltreatment by Expanding Evidence-Based Prevention and Intervention

LegisStat Recap

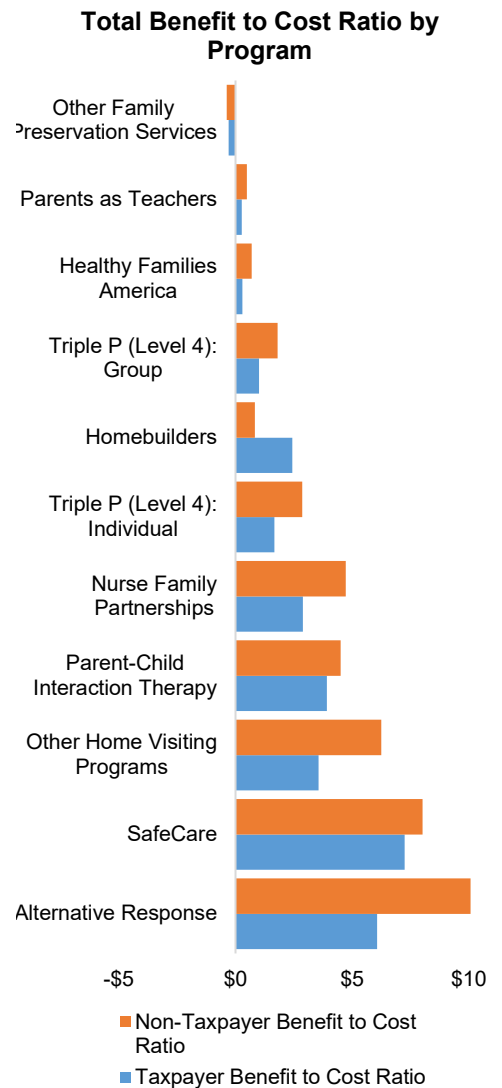
On the topic of preventing repeat child maltreatment, at the previous Children, Youth and Families Department’s LegisStat hearing in August 2022, the committee was interested in the department’s actions surrounding federal Comprehensive Addiction and Recovery Act (CARA) plans of safe care, what was being done to expand and pilot the department’s alternative response system as required in Section 32A-4-4.1 NMSA 1978 and enacted in 2019, and when the department was going to submit the state’s Families First Prevention Services Act (FFPSA) plan to the federal government allowing the department to leverage Federal Title IV-E revenue for prevention services.

Progress

Since the August 2022 LegisStat hearing, the department submitted the FFPSA plan and is waiting to hear back from the federal government on whether the plan was accepted or if revisions are needed. The purpose of the plan is to begin using federal support to stand up prevention and intervention programs with federal funding. Planned behavioral health program expansions include high-fidelity wrap around, family peer support services, infant mental health, and multisystemic therapy. The department also wants to stand up other programs also included on the federal Title IV-E clearinghouse including Healthy Families America (Well Supported), Child First (Supported), Safe Care (Supported), Family Spirit (Promising), and Motivational Interviewing (Well Supported). CYFD also chose to continue Family Connections, an in-home services model, and will use a portion of the Title IV-E implementation funding to evaluate the model hoping the federal government will include the program in the Title IV-E clearing house.

Since the last hearing the department also expanded its alternative response like program to San Miguel, Mora, Lea, Otero, Sierra, Socorro, and Lincoln Counties. The program, also known as Family Outreach and Community Engagement (FORCE), is meant to be an evidence-based approach to prevent child maltreatment and avoid costly and more traumatic interactions with the child welfare system by diverting families into services rather than putting the families and children through traumatic removals, when appropriate. Spending on the program slowed from \$1.5 million in contractual services in FY21 to about \$600 thousand in FY22. Currently, the lowest level of response is being implemented. The department needs to consider expanding to two additional levels of response for families with greater need and expanding in the larger population centers where there is a substantial need and more providers for these types of services.

In August, the committee also had questions related to the department’s implementation of CARA plans of safe care. Since the hearing, the department provided data showing that between October 1, 2020, and September 30, 2021, there were 1,163 plans of care established for infants with symptoms consistent with prenatal drug exposure, withdrawal symptoms, or fetal alcohol spectrum disorder. Of these, 24 percent had a report for concerns of maltreatment with half of those receiving a subsequent investigation and the other half screened out for further action.



Source: LFC Analysis of Pew Results

Suggested Questions

- Can CYFD commit to setting a goal to reduce repeat child maltreatment from 14 percent to 11 percent in the next two years?
 - What would CYFD need to do to meet this goal?
 - What funding would be needed?
 - What activities should be initiated or expected?
 - Did the department include requests for funding to stand up any of these programs?
- Does CYFD have a long-term strategic plan to reduce repeat child maltreatment?
 - What is the plan?
- What is the timeline?
- What would it take to expand CYFD's alternative response or FORCE program to larger population centers?
 - What is the timeline?
 - Is CYFD's alternative response program based on an evidence-based model or is it home grown?
 - If not evidence-based should the state continue expanding FORCE as it is currently constructed?
 - Is CYFD evaluating the costs and benefits of FORCE?
- When will CYFD provide a protective services program inventory to the LFC?
- Which of the above evidence-based programs are currently being implemented by CYFD?
- What would it take to implement or expand the above programs?

Performance Challenge: Meeting Child Welfare System Workforce Needs

LegisStat Recap

At the August hearing, LFC members had a lot of questions related to CYFD workforce development such as whether there is a plan to address compensation, training, and loan forgiveness. The committee also asked about higher education social worker endowments and whether the department is working with higher education institutions to expand endowed teaching positions strategically.

Workforce shortages are a blight on New Mexico's child welfare system with high demand for social workers, caseworkers, and investigators continuing to cause high caseloads and, in some cases, missed opportunities to prevent abuse. Much of the workforce shortage is due to poor recruitment and retention because working in the child welfare system is stressful, exposure to trauma is common, and the job is emotionally taxing. Additionally, many people recruited by the department have a skills, education, and licensure mismatch and leave due to a lack of training.

Progress

In addition to the workforce plan the department submitted as a part of its efforts to address the Kevin S. Lawsuit settlement, the department also recently submitted a new recruitment and retention plan. Aside from efforts already underway, such as targeted 10 percent salary differentials for hard to fill positions and requesting funding for appropriate placement salary adjustments as a part of its FY24 budget request, the department says it is working with higher education, the state personnel office, and others to improve the social worker pipeline. For example, the department is working with Central New Mexico Community College to develop a fast-track program for students interested in pursuing a bachelor's degree in social work. The students would be able to complete prerequisites in half the time it would take in a traditional program and the department thinks they can use federal Title IV-E for some of the costs. Additionally, child welfare tech positions will be created within the department for students participating in the fast-track program. This would free up experienced social workers to spend more time in the field while fast track students get experience. For existing employees, the plan would create incentives for non-licensed social workers and those who do not have a social worker degree, to get licensed or degreed by increasing access to educational leave and promoting social work stipend programs within the department.

Other actions in the plan include working with the State Personnel Office to allow for the substitution of education for experience for Child Protective Services positions, creating new associate and entry level positions, and working to speed up the internal hiring process by reorganizing human resources. CYFD will also start improving upon the Title IV-E stipend program by trying to integrate students into Protective Services work sooner, placing students more quickly, conducting continual evaluation, and matching child welfare students with professionals early on in their studies to serve as mentors.

Suggested Questions

- Can CYFD commit to reducing the turnover rate from 36 percent in the third-quarter of FY22 to 20 percent over the next two years?
- Can the department commit to reducing caseloads 40 percent over two years?
- What evidence-based options are available to the state to improve retention?
- What evidence-based options are available to the state to better prepare the next generation of child welfare workers?
- What can the department do to build a pipeline of social workers into Child Protective Services?
- What would it cost to make the salaries for investigations, permanency planning, placement, and in-home services workers competitive enough to reach national caseload benchmarks?

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