Report of J Paul Taylor Task Force 2020

Chair: Andrew Hsi, MD, MPH

Co-presenters: Susan Merrill, LCSW, Community and Social Services Coordinator for Children and

Youth with Special Health Care Needs

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- I. Introduction, 2 minutes
  - A. Report on first year of implementation of Plan of Care HB 230, 12 minutes
  - B. Observations on failure to prevent child neglect, 6 minutes
    - 1. Adverse Childhood Experience type, estimated 50% of NM children have 1 by age 3
    - 2. Attempted to work on positive behaviors; Adequate and Appropriate Parenting
- II. Report by CARA Work Group to answer 3 main questions
  - A. Implementation of comprehensive hospital discharge plans by birthing hospitals
    - 1. Training completed for all birthing hospitals
    - 2. Extending training to birthing centers, doulas, general public
  - B. Cooperation of Managed Care Organizations
    - 1. Assignment of care coordination leads
    - 2. Acceptance of role for care coordination
    - 3. Efforts to support pregnant women with substance use in prenatal care
  - C. Prevention of child abuse
    - 1. Families have accepted plans of care, almost 1,000 generated
    - 2. CYFD has had fewer investigations driven by bias and discrimination, SCI has not seen increased numbers of young infants referred after birth
    - 3. Reports for Suspected Neglect and Abuse made if family doesn't engage with services; appropriate efforts made to support parents, infants' safety protected'
  - D. Evaluation report preliminary presented to work group
- III. Prevention of child neglect
  - A. Neglect almost always precedes child abuse; therefore prevention will be effective
  - B. Upstream efforts such as Plan of Care increase access to earlier supports and services
    - 1. Funding priorities do not match with intention to prevent child neglect
    - 2. Difficult to organize leadership in state around creation of policies or procedures for prevention
  - C. Early childhood education starts in months after hospital discharge of infants with prenatal substance exposure and not specifically organized to address parental behavioral issues
    - 1. Depends on family engaging with services
    - 2. Infants at highest risk of health harming social determinants most likely to drop out
    - 3. Services are a necessary but not sufficient answer to complex family needs
    - 4. Pandemic conditions decrease in-home contacts
  - D. Systemic biases and discrimination due to stigma permeate systems; advocates have applied limited perspectives that seem to favor either the mother or the infant illustrating challenges of supporting the development of all individuals in family system.
  - E. Recommend the Senate renew the memorial forming the task force urgently.
- IV. Questions at end of testimony