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Aging and Long-Term Services Department.





Brian Blalock

Children, Youth, & Families
Department

New Mexico Health Cabinet Secretaries.

Working Together for New Mexicans

Dr. David Scrase, MD

Human Services Department.





Kathy Kunkel

Department of Health

LFC Hearing, December 12, 2019

Strategic Plan Foundation

More Appropriate Placements

Reduce Congregate
Care

Increase Kinship Care

Increase Community
Based Mental Health
Services

Special Protocols for Vulnerable Populations

Prevention

Institutionalization

Homelessness

Trauma

Optimization

Data

Accountability

Funding

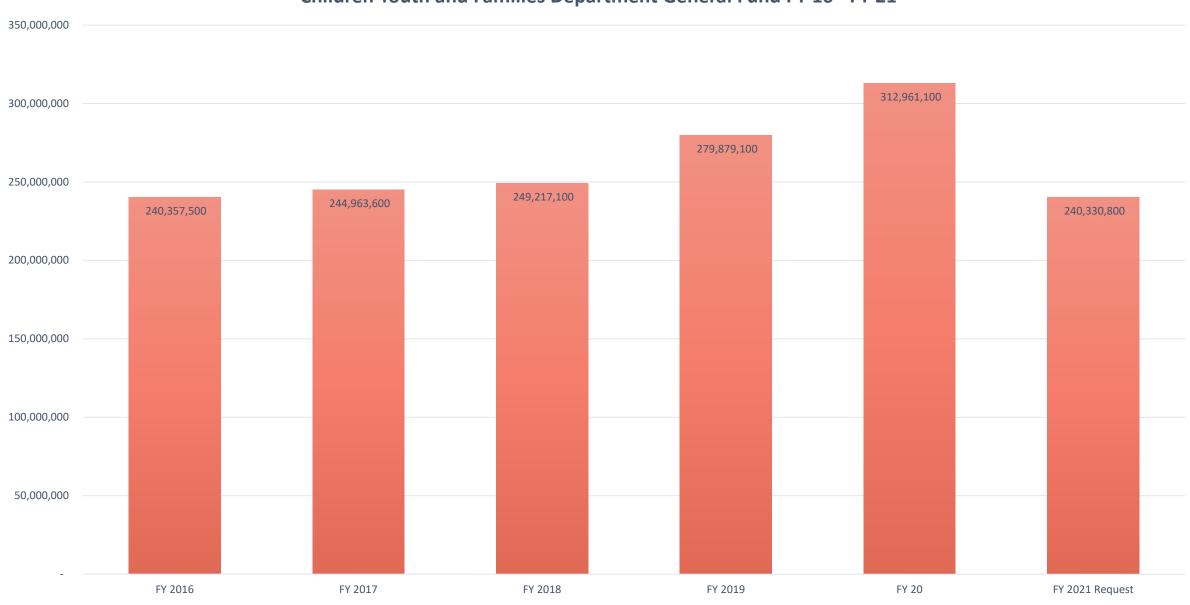
Staffing

Vacancy Rates

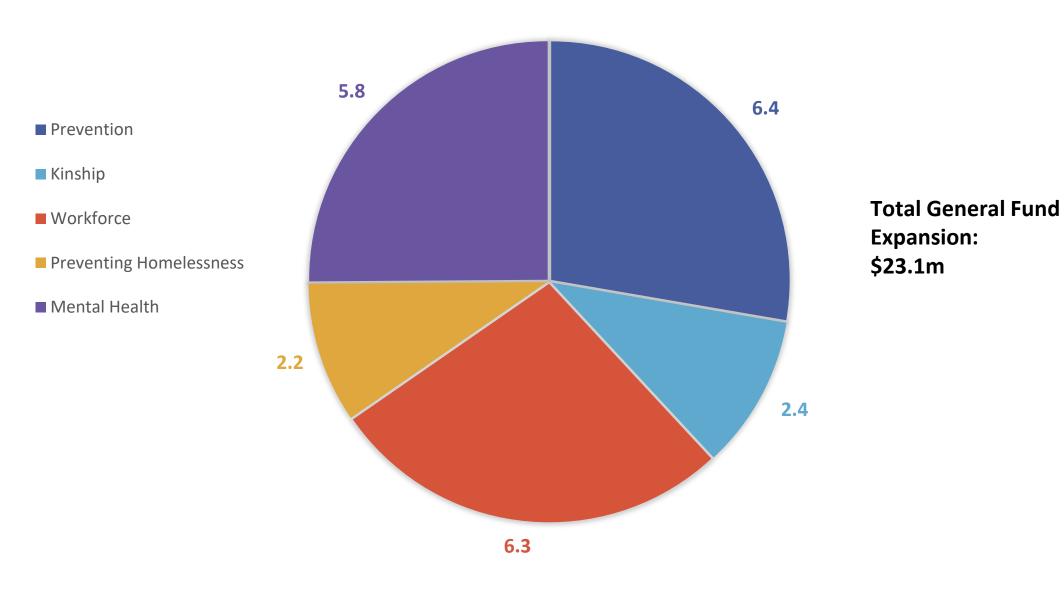
Increased training/support

Workforce Development

Children Youth and Families Department General Fund FY 16 - FY 21



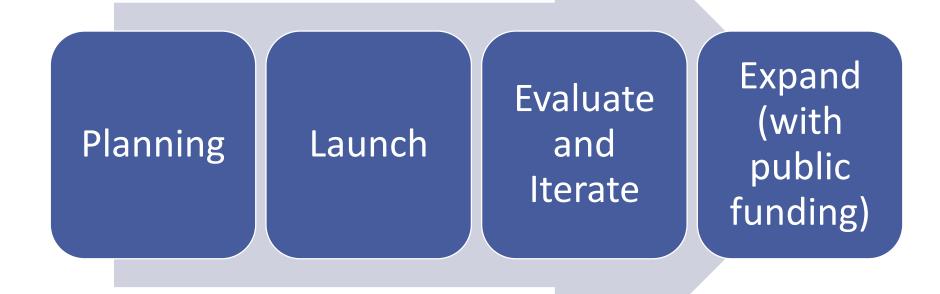
CYFD STRATEGIC PLAN PRIORITIES





Research and Development (R&D) Cycle

Build Fast Now, Grow Sustainably Over Time



Evidence-Based and Best Practices Services and Supports Expansion

BHS included a total of \$5.6 recurring in the FY21 Request as a General Fund expansion; \$400K included as a capital outlay request; and \$5.2 nonrecurring through a special appropriation.

Initiative	GF Recurring	GF Non-Recurring	Fed. Funding Leveraged
Expansion of Multi-systemic Therapy (MST) Infrastructure from 16 MST teams to 26 statewide.	None requested; Once implemented, will use Medicaid	\$3,000. - Funds will support the planning, training, and other related infrastructure needs of the MST providers as well as other startup costs.	Approx. \$200 to \$300K
Expansion of one new Maternity Home for expectant and parenting youth in order to meet their specialized placement needs and those of their children.	\$300. Ongoing daily rate at maternity home	\$500. - For planning, curriculum and training, and related infrastructure needs	\$150.54
Integrated Behavioral Management Services (BMS)] - Initiative to support children/youth who are in out of home placement for their return to the least restrictive, community-based placement.	\$150. Ongoing evaluation and training	\$400. - Non-recurring funds will support identification/training on a new BMS curriculum and model, as well as training in the NHA, CANS, and related startup costs.	Analysis pending
Building Bridges Initiative (BBI) Development and implementation of approximately twelve Qualified Residential Treatment Programs (QRTPs). BBI will guide CYFD BHS in steps needed to implement QRTPs.	None requested; not a recurring request at this time	\$200. - Funds will be used for planning, designing, training, and other related infrastructure needs.	
Development of intensive Transitional Living Programs (TLP). To support the transition of youth from out-of-home placements to the least restrictive community based placements.	\$1,000. For ongoing program services	\$1,000. - Funds will support start-up costs, identification/training on a consistent ITLP curriculum and model to be implemented with new providers.	Analysis pending. Current data suggests approximately
Survivors of child sex trafficking. For safe placements for youth who are survivors of child sex trafficking under the age of 18 years.	\$400. Ongoing daily rate at placement	\$100. - For provider infrastructure and start-up costs. *CYFD also submitted Capital Outlay Request for \$400. to address renovation needs to meet LCA licensure.	\$46.29

Rebuilding Community Based Mental Health R&D – In Action Right Now

Infant Mental Health Stage: Expansion

- Developing capacity from birth to 5 to form relationships and manage emotions
- Currently have sites in Dona Ana, Silver City, Luna, Santa Fe, and Albuquerque.
- Medicaid funded expansion includes 8 Northern Pueblos, San Felipe, three Albuquerque providers, Valencia County, Sandoval County, Hobbs, and Farmington.
- #s served: 200 children per year. Post expansion: 400 children per year.

High Fidelity Wraparound State: Evaluate/Iterate

- SAMHSA funded pilot
- providing intensive care coordination in a strengths-based model focused on adult supports and behavioral health interventions.
- Five current sites: Clovis, Farmington, Hobbs, two Albuquerque provider
- #s served: 150 youth per year

Behavior Management Services (BMS): Launch

- Time limited, intensive, strength-based, community-located behavioral support to prevent institutionalization
- Locations: Albuquerque, Las Cruces, Hobbs/Anthony
- (Anticipated) #s in Year 1: 150 youth (with a focus on bringing back youth in out-of-state institutions)

Building the Infrastructure for Purchaser / Not Provider Growth of Services

State Government **Evaluation**, Funding + Iteration, **Technical Improvement** Assistance + Oversight + **Training** Families and **Providers** Youth Services

Building the Infrastructure to Support the Reform + Rebuild

Finance and Quality Team (9 total)

- Developing and implementing programmatic and quality review functions for provider agencies receiving grant and state general funds
- Conducting site visits and audits of programs
- Managing the administration services functions
- •Monitoring and tracking projections ensuring General Fund dollars are being used appropriately and Medicaid eligible clients are being billed appropriately to Medicaid
- Data reporting and analysis
- Contract Manager
- •Data Unit
- •Standards and Compliance Unit

Program Team (6 total)

- Content expertise of evidenced-based, research-based and promising practices specific to program areas
- •Collaboration with behavioral health providers to develop and expand programs
- •Program site visits, audits and fiscal monitoring
- •Training and technical assistance
- Liaising with internal and external partners to successfully implement programs

Youth Supportive Housing Unit
High Fidelity Wrap Unit
Youth Engagement Coordinator
Infant Mental Health Lead Clinician

Congregate Care and Outcomes for Youth

- Significantly increased risk of arrest (Hernandez, 2008)
- Higher rates of re-entry into foster care after reunification than those reunified from family-based care (Barth, 2002)
- Less likely to graduate and more likely to drop-out of school than children and youth in family-based care (Wiegmann et al, 2014)

But for some youth, outcomes are positive if small with good supports.

- Expecting / Parenting (see: growth of dedicated beds)
- CSEC (see: creation of Safe Home)
- High level disability for stabilization (creation of 3 RCLs in Cuba, Lamy, and Tome to serve youth statewide)

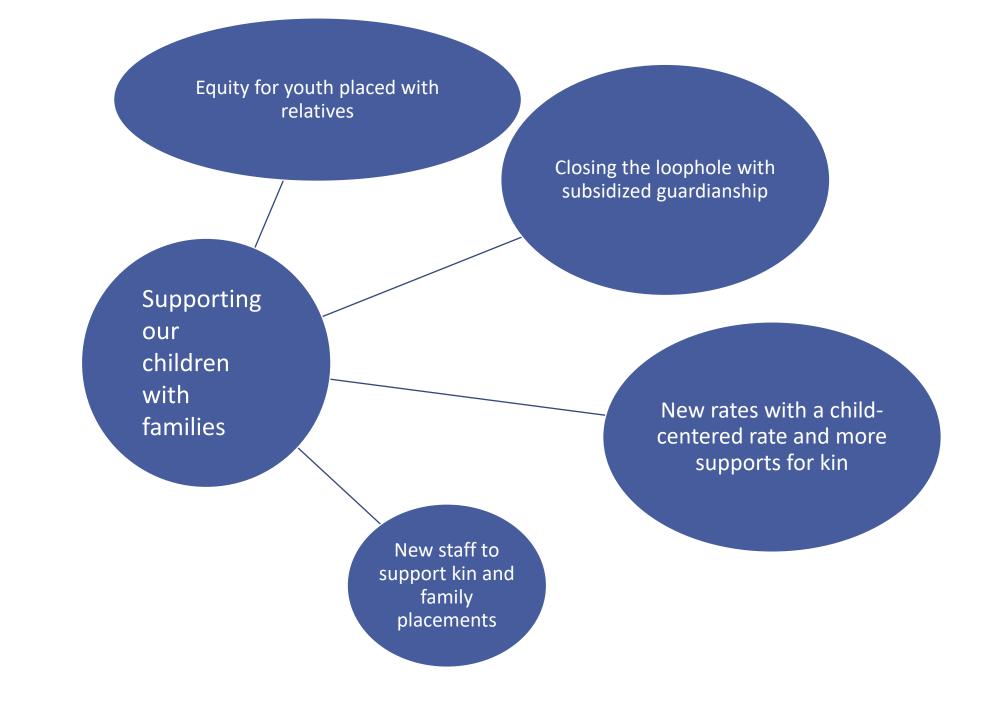


When foster children are connected to kin, however, the experience is often more positive



Research has shown that foster **children in kinship care** have:

- Fewer prior placements
- More frequent and consistent contact with birth parents, siblings
- Felt fewer negative emotions about being placed in foster care than children placed with non-relatives
- Less likely to runaway



Relative and Kinship Care Supports

Initiative	GF	Fed. Funding Leveraged
Revamping our rate structure for children and youth served through PS and JJS with a focus on the needs of the child	\$1,800,000.00 ·	Approx. \$300K to \$500K
Create Community Based Support Services for Relative and Kin through 3 Relative Success Centers (Bernalillo, Dona Ana, 1 Rural County TBD) & Statewide Legal Services.	\$500,000.00	\$220K
Develop a subsidized guardianship program to serve approximately 300 PS and JJS children annually to close the loophole on kinship guardianship in the state.	\$1,720,000.00	Estimated \$300K to \$500K in costs savings
Increase staff to specialize in supporting kinship caregivers & programs.	\$557,700.00	

USNews

Report: Funding Fails to Stop Domestic Violence

The number of domestic violence incidents in New Mexico has remained steady over the last three years despite an increase in funding for services.

SANTA FE, N.M. (AP) — The number of domestic violence incidents in New Mexico has remained steady over the last three years despite an increase in funding for services.

Analysts with the Legislative Finance Committee also found that the number of clients receiving services over the same period has dropped.

According to their findings, domestic violence affects a large number of New Mexicans. Law enforcement in 2018 responded to almost 19,000 reports of domestic violence, roughly the same as in 2014.

About one-third of the cases generally have children present.

The analysts say the number of children receiving services has dropped 20 percent over the last three years.

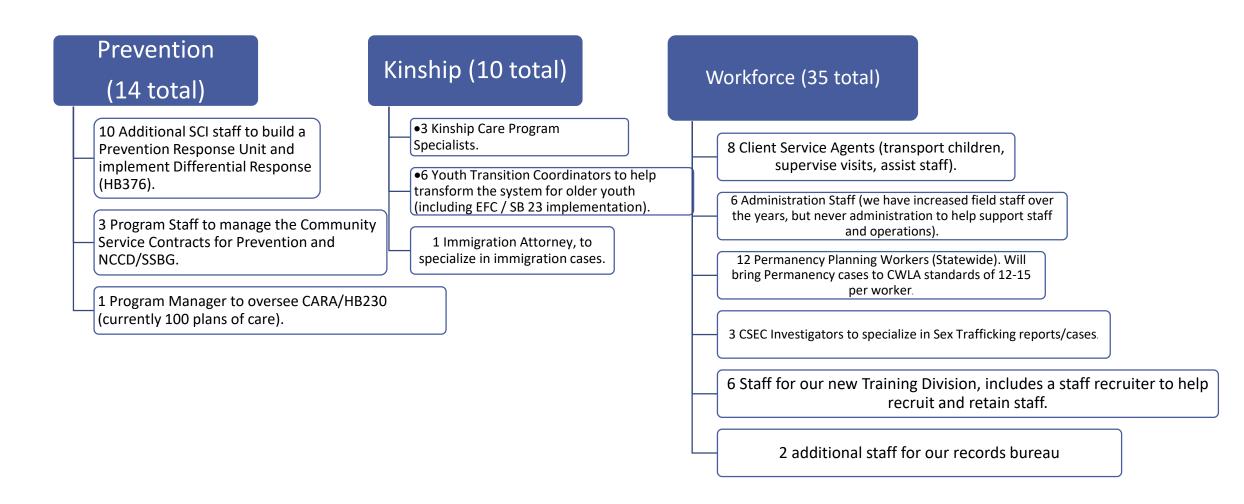
Although the state Children, Youth and Families Department has failed to implement some programs mandated by legislation, the report says the agency is doing better at assessing the effectiveness of its programs.

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Commitment to Improved Domestic Violence Services

Initiative	GF
Children's Capacity Building Project - Level-up the successful pilot to ensure child- and parent-focused support in domestic violence programs to address child trauma.	\$520,000. - Funding specialized staff and training in each program statewide would potentially serve an additional 450 children and 400 non-offender parents per year. (FY19 served 337 children and 298 non-abusive parents)
Core Services Expansion – Increase allocations to successful programs and expand core domestic violence service funding to Tribal Nations.	\$1,594,100 This 13% increase would allow services to an additional 750-1000 survivors annually. (FY19 served 5053 adult survivors and 1709 child victims/witnesses)
Offender Treatment Training and Improvement- Increase amount and quality of DV Offender Treatment and Intervention Program training available through the NM Coalition Against Domestic Violence and the Coalition to Stop Violence Against Native Women, and support system-wide program improvements as we implement CCRC and Colorado Model type policies.	\$135,000- FY19 provided 3 DVOTI facilitator trainings. We will more than double training and will need additional resources to expand coordinated community response.
Statewide Needs Assessment – Working with research partners to identify unmet needs of domestic violence survivors and their children, and better assess outcomes through data-driven program design and evaluation for survivor services and offender intervention and accountability.	\$190,000
CYFD Staff & Admin — Additional Staff in the DV Unit will increase monitoring and accountability for domestic violence victim services and offender treatment programs statewide, and allow CYFD to focus on collecting, reporting on, and acting on outcomes data for systems improvement.	\$260,900

Building the Infrastructure to Support the Reform + Rebuild



Creating the Infrastructure for the System We Need

Fiscal Health -Fiscal Health -IV-E + SSI rotating loan Medicaid fund Staffing -Restructuring Public + to better **Behavioral** support Healthcare vulnerable populations Lens

Improving the Fiscal and Overall Health of our Juvenile Justice System

Increased supports for caregivers, including subsidies, reunification and family maintenance services, + subsidized permanency options

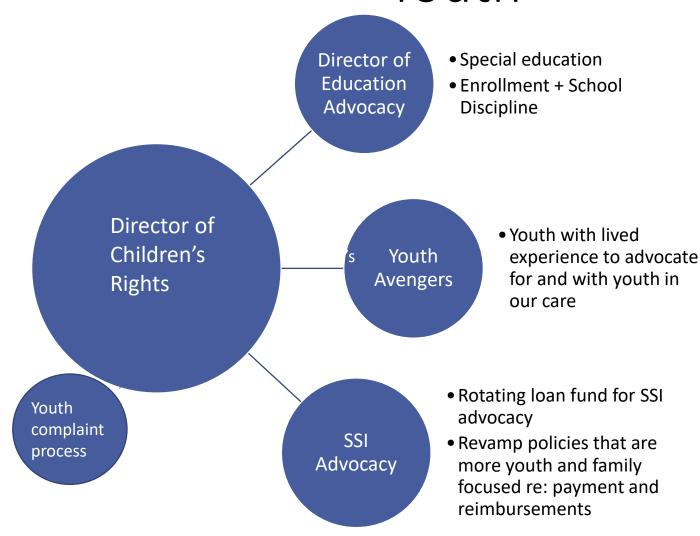
Increased support for youth, including subsidies, housing, identify theft protections, family maintenance and permanency supports + eligibility for extended care

Court Findings for Out-of-Home Placements

Increased availability of placement options, including family and community placements with therapeutic supports

Increased support can support lower recidivism, decreased exits to homelessness, increased family connections, and increased resources for therapeutic supports

Increasing Accountability for All Vulnerable Youth



Building More Appropriate Placements

Prevention Increase Reduce **Community Based** Congregate Care Supports

More Appropriate Placements Work Streams

Congregate
Care Reform

QRTP Licensing

Building out exceptions for special populations

Community
Based Supports

Kinship Care

Community Based Mental Health Services Prevention

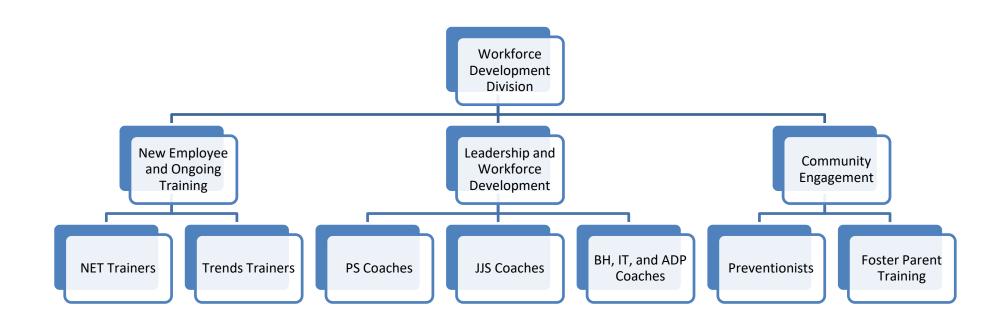
Restructuring Front Door Access (SCI, Homelessness Partnerships)

Behavioral Healthcare Supports for Parents (HB 230, residential stays, MST)

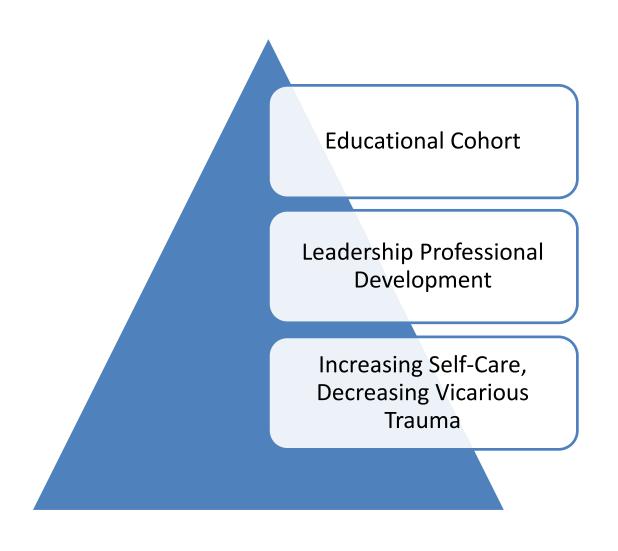
Revamped Trainings –Better Supporting Our Staff

Soft Skills and **Implementation Personal Effectiveness** Role Skills and Knowledge **Core Competencies Foundational Skills**

Responsive Training to Workforce Needs



Retention and Advancement of the Workforce



Evaluation and Revision

Level 2: Learning--Is the Workforce More Knowledgable Pre-Test/Post-Test Supervisor Satisfaction Surveys RBTC IDP Assessments Level 3: Application--Is the Workforce Using Skills Trends in Data Constituents Reviews Supervisor IDP Assessments

Level 4: Division Impact--Has the Workforce Changed Trends in Data External Partners Reviews Review of KPIs

Level 1: Reaction--Does the Workforce Like/Want the Program

Feedback from Employees, Supervisors and Leadership Self-Satisfaction Surveys

Supervisor Satisfaction Surveys

IMPACT OF THE PROGRAM

Getting for the Effort
Funding/Cost Evaluation
Culture Shift Reviews
Review of KPIs
Retention/Turnover Rate

Level 5: ROI--What are We