



Mission Statement

Improve the quality of life for our children

Strategic Planks

- Shore up our Core Functions
- Prevention
- Financial Controls
- Community & Stakeholder Engagement

Operating Principles

- Be kind, respectful and responsive
- Be child/youth-centric
- Create a culture of accountability and support
- Simplify: Do fewer, bigger things that produce results
- It's all about the quality of our workers

CYFD FY19 Budget Request

• Overall CYFD

- Total FY19 General Fund request **\$275,217.1** (Total FY19 Budget Request: \$503,377.4)
 - **\$26,000.0** General Fund increase over the FY18 OpBud (**\$249,217.1**)
 - \$25,000.0 in Early Childhood Services for Child Care Assistance
 - \$1,000.0 in Protective Services for 16 additional filled positions

• Early Childhood Services

- FY19 ECS General Fund request **\$85,371.8** (Total FY19 Budget Request: \$245,539.4)
 - **\$25,000.0** in new money for Child Care Assistance
 - See pages 2 and 3
 - Requesting non-reverting language
 - Note: decrease in federal and other funds of **\$17,200.0** (End of Race to the Top and Child Care Development Grant balance)

• Protective Services

- FY19 PS General Fund request **\$92,773.6** (Total FY19 Budget Request: \$149,953.5)
 - General Fund increase of **\$4,555.8**
 - **\$1,000.0** in new money for 16 additional filled positions
 - **\$2,000.0** from JJS for care and support
 - **\$1,450.5** from BH for forensic interviewing contracts
 - **\$105.3** from Program Support for transfer of 3 FTE
 - Realigned contracts to actuals to meet additional care and support and PSEB needs
 - Requesting non-reverting language
 - Note: Decrease in other revenue due to decrease in domestic violence court fines

• Juvenile Justice Services

- FY19 JJS General Fund request **\$68,289.6** (Total FY19 Budget Request: \$71,475.9)
 - General Fund decrease of **\$4,815.0**
 - **\$2,000.0** to PS for care and support
 - **\$2,815.0** to BH for transfer of Community Behavioral Health Clinicians (CBHCs) (40 FTE)
 - Note: increase in JJAC and JCC from fund balance of **\$845.9**

• Behavioral Health Services

- FY19 BH General Fund request **\$15,749.8** (Total FY19 Budget Request: \$17,271.4)
 - General Fund increase of **\$1,364.5**
 - **\$2,815.0** from JJS for transfer of Community Behavioral Health Clinicians (CBHCs) (40 FTE)
 - **\$1,450.5** to PS for forensic interviewing contracts
 - Note: decrease in federal fund of **\$991.8** due to grants ending

• Program Support

- FY19 Program Support General Fund request **\$13,032.3** (Total FY19 Budget Request: \$19,137.2)
 - General Fund decrease of **\$105.3**
 - **\$105.3** to PS for transfer of 3 FTE

CYFD FY19 General Fund Increase Request

- **FY19 General Fund Increase Request: \$26,000,000.00**
 - \$1,000.0 in new money for additional filled positions in the Protective Services Division
 - \$25,000.0 in new money for Child Care Assistance

Protective Services Request

- \$1,000.0 for 16 additional filled positions
- 112 more field workers (up 33%) from FY15 Q1 to FY17 Q4
- Improved 8 out of 10 LFC performance measures from FY16 to FY17
- However, caseloads remain high (12 investigators, 19 permanency, and 27 placement workers)

Child Care Assistance Request

- \$25,000.0 in new money for Child Care Assistance
- Overall support of Early Childhood Continuum of Services has increased significantly
 - Funding at CYFD has grown by \$67.5 million dollars since FY11

Child Care Assistance

- Increased funding from \$85.7 million in FY15 to \$116 million in FY18
- Increased the number children served from 15,918 in July 2014 to 20,871 in September 2017

Early PreK

- Increased funding from \$0 in FY11 to \$6.7 million in FY18
- The number of children served in the Early PreK program has grown from 0 in FY11 to 950 in FY18

PreK

- Increased spending from \$8.3 million in FY11 to \$22.3 million in FY18
- Increased the number of children served from 2,314 in FY11 to 3,198 in FY18
- The number of children currently served in the PED PreK program is 5,209

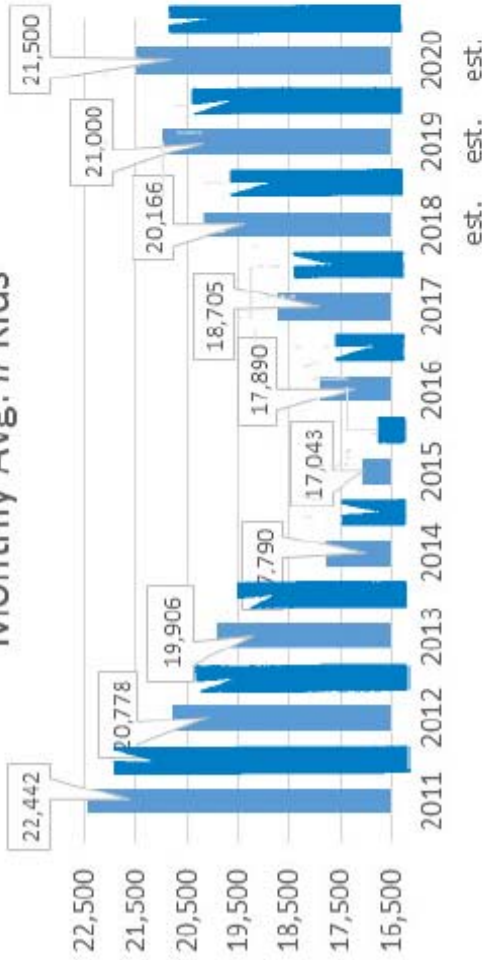
Home Visiting

- Increased funding from \$2.2 million in FY11 to \$18.7 million in FY18
- Increased the number of children served from 592 children in 21 counties in FY11 to 3,178 in 31 counties in FY18
- Launching 3 new pilot programs
 - *Level II Home Visiting*
 - Targeted Home Visiting for high needs families
 - Currently serving 228 high risk families
 - Families are being referred by PS, JJ, BH, domestic violence providers, homeless shelters and Home Visiting screeners
 - There is a high engagement of families participating in Home Visiting
 - CYFD provided additional training and technical assistance to meet the needs of high risk families and offering TEACH scholarships
 - *NICU Level II Home Visiting*
 - Targeted Home Visiting services for children and families involved in the Neo-natal Intensive Care Unit (NICU) Hospitals
 - Provided intensive training to doctors and nurses on supporting the parents during NICU stay
 - *Medicaid Evidence-based Home Visiting* – CYFD has been working with DOH and HSD to implement an evidence-based early childhood Home Visiting pilot for eligible families and their children prenatal to age three that focuses on pre-natal care, post-partum care and early childhood development in the following counties: Bernalillo, Eddy and Lea counties
- **Why Child Care Assistance, why now?**
 - Without \$25 million, adjustments to the programs entry and exit income eligibility requirements would need to be made
 - Child Care Assistance is a foundational component to the entire system, providing wrap around for PreK and Home Visiting
 - Child Care Assistance address multigenerational issues by incentivizing parents to go to work or school

Child Care At-A-Glance

(revised Nov. 2017)

Monthly Avg. # Kids



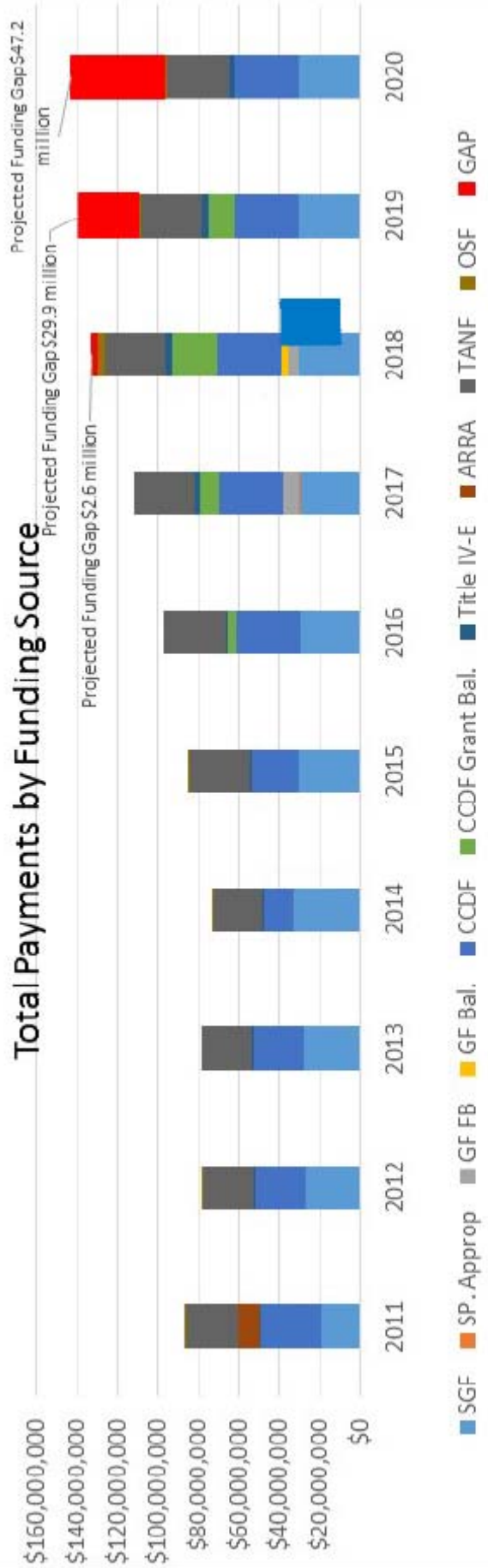
Monthly Avg. Cost per Kid



FY16 – Implemented At-Risk Child Care Pilot in Bernalillo, Sandoval & Valencia Counties; rolled out Pull Together
 FY17 – Implemented 12-month Child Care Certification; implemented statewide At-Risk Child Care

FY15 – Increased infant & toddler base rates; established FOCUS quality differentials; increased rural rates equal to metro
 FY16 – Increased pre-school & school-age base rates; further increased FOCUS quality differentials
 FY17 – More kids in higher quality settings; Recognized a new Accredited Entity for quality - NECCPA

Total Payments by Funding Source



The Benefits of Child Care

- **Quality of Life**

- **Alive**

- From 2015 to date there have been at least 9 infants and school-age children that have died as a result of being left with an inappropriate care taker or unattended after school.

- **Safe and cared for**

- In FY17 1.2% of children receiving a child care subsidy were reported as experiencing repeat maltreatment as opposed to 11.1% for the general population.
- Child care licensure ensures health and safety of children in licensed or registered child care programs.
- Child care subsidy base requirements, in addition to health and safety, ensure that programs support the social-emotional wellbeing of each child enrolled.
- Child care programs participate in the USDA Child and Adult Care Food Program, which ensures that children receive nutritious and well balanced meals.
- Child care programs that enter the FOCUS quality system promote and connect families with well child check health care providers. This includes physical and dental checkups. In addition, Ages and Stages Questionnaires are conducted to identify possible developmental delays and disabilities and referrals to IDEA Part B or Part C take place.
- After school – when children are in “self-care” for extended hours a day, they are more likely to engage in dangerous and illicit activities.

- **Prepared to be a contributing member**

- Child have regular schedules and activities, which promotes learning and an easier adjustment to formal schooling.
- Time with peers – learn how to problem solve, share and play and learn together.
- Interaction with other adults – very young children learn mostly from adults – child care provides an opportunity for children to see other positive adult role models.
- An extensive study by the U.S. National Institutes of Health found that young children had higher cognitive and academic scores as teens, if they spent time in high-quality child care facilities. High quality child care facilities are defined as those that provide extensive interaction with care providers, support and cognitive boosting activities.
- A recent University of Texas at Austin study showed that parents who enroll their child in child care were more likely to be involved in school life as their children got older.
- New Mexico FOCUS is based on National Research, best practices and standards from NM Pre-K and Home Visiting programs.

- **Strengthens families**

- Allows parents to go to school or work.
- Allows parents and caregivers to arrive at work ready to be productive, reducing absenteeism.
- Gives parents and caregivers the opportunity for higher education programs.
- Parents feel part of a community.

- **Financial benefits**

- U.S. Census Bureau, Census 2014. The child and early education industry is an economic driver, it provides nearly 1,260,600 jobs and generates over \$1.5 billion in gross receipts.
- Decreasing the need for remedial education and decreasing involvement in criminal justice and child welfare systems – saving public funds.
- According to the New Mexico Labor Market Statistics Unit, in New Mexico, the Child Care industry employs over 8,500 workers across the state. Generating about \$ 164,326,320.00 per year in wages.