

ACTION PLAN

Submitted by agency?	Yes
Timeline assigned?	No
Responsibility assigned?	No

For the first quarter of fiscal year 2026, the Children, Youth and Families Department (CYFD) continued to struggle to meet critical performance targets. New Mexico consistently ranks among the top six states for repeat maltreatment occurring within 12 months of the initial allegation. In the first quarter the state’s reported rate of repeat maltreatment reached almost 16 percent, almost twice the national average. Although the state has enacted legislation and significantly increased appropriations for evidence-based approaches to reduce and prevent maltreatment, such strategies have largely not yet been implemented. At the start of FY26, the number of children in foster care remained over 2,000 children monthly, an increase from prior years. The department continues to face challenges recruiting and retaining a professional social-worker workforce, and turnover in Protective Services was over 41 percent in the first quarter. While some indicators of Protective Services performance have improved, others are trending in a negative direction. In juvenile justice services, while several indicators continue to be positive, populations in secure facilities continue to be high relative to previous years.

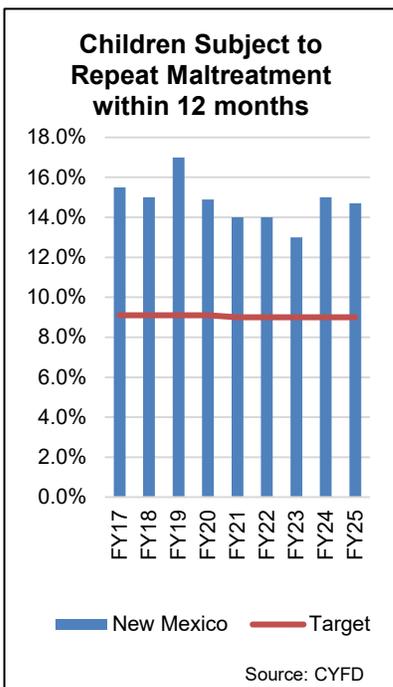
Protective Services

Prevention. Prevention and early intervention are key to reducing maltreatment and repeat child maltreatment, and several evidence-based options for preventing repeat maltreatment could be expanded and leveraged to garner more federal revenue and improve outcomes. In the past five years, CYFD preventive services expenditures have grown significantly, though these expenditures remain a small share of all Protective Services spending. In September 2025, CYFD received approval of a revised plan submitted to the federal government for reimbursement for prevention services and the plan became effective October 1, 2025. Provision of two included services, Motivational Interviewing and SafeCare, are now eligible for federal reimbursement.

Repeat maltreatment increased to over 15 percent in the first quarter of FY26, well above the national benchmark of 9 percent. The repeat maltreatment measure is an indicator of how successfully CYFD is facilitating families’ engagement in secondary prevention and intervention services. The greatest opportunity to intervene and prevent repeat maltreatment exists near the initial case, and the repeat maltreatment data reflects organization practice roughly a year prior. Of concern, after remaining relatively stable in FY23 and FY24, maltreatment in foster care increased by over 20 percent in FY25 and reached a rate of 13.1 in the first quarter of FY26.

To address maltreatment, CYFD requires a professional social worker workforce, but the department continues to struggle to recruit and retain Protective Services staff. After improving slightly in FY24, turnover in the program again increased to over 40 percent in the beginning of FY26.

Foster Care. The number of children in foster care in New Mexico steadily declined from FY17 to FY23, when the trend reversed. In the first quarter of FY26, over 2,100 children were in state care. The state continues to underperform on placement stability and achieving permanency. CYFD has continued to struggle with complying with the requirements of the *Kevin S.* settlement, including recruitment of resource (foster) homes. In the first quarter of FY26, CYFD did not report the number of foster youth placed in the least restrictive community-based placement.



Budget: \$230,995.7

FTE: 1,179

FY24 Actual **FY25 Actual** **FY26 Target** **FY26 Q1** **Rating**

Maltreatment

Percent of children in foster care who have at least one monthly visit with their case worker* 86% Not reported N/A Not reported **R**

Children who were victims of a substantiated maltreatment report who were victims of another substantiated maltreatment allegation within twelve months of their initial report 15% 15% 9% 15.7% **R**

Rate of maltreatment victimizations per one hundred thousand days in foster care within a rolling twelve month period 10.0 12.4 8 13.1 **R**

Families that participated in in-home services or family support services and did not have a subsequent substantiated report within the next twelve months 74% 82% 80% 82% **G**

Fatalities or near-fatalities in a rolling twelve-month period that had protective services involvement in the twelve months preceding the incident 57% 34% 15% 39.1% **R**

Average statewide central intake call center wait time, in seconds 76 78 50 26 **G**

Foster Care

Turnover rate for protective services workers 34% 37% 25% 41.7% **R**

Of the children who enter care during a 12-month period and stay for greater than 8 days, placement moves rate per 1,000 days of care 8.1 7.9 4.75 8.2 **R**

Children in foster care more than eight days who achieve permanency within twelve months of entry into foster care 34% 32% 42% 26.5% **R**

Children removed during a rolling twelve-month period who were initially placed with a relative or fictive kin 32% 36% 43% 36.4% **Y**

Children in foster care for twenty-four months or more at the start of a twelve-month period who achieve permanency within twelve months 25% 24% 30% 27.3% **Y**

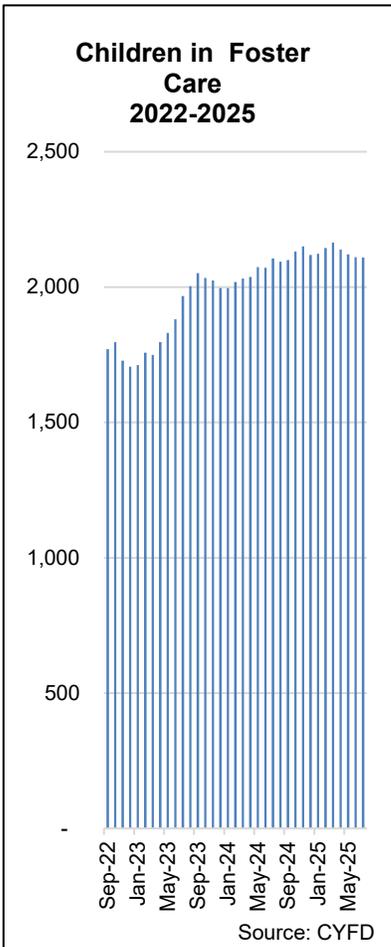
Foster care placements currently in kinship care settings 48% 47% 42% 44% **G**

Children in foster care for twelve to twenty-three months at the start of a twelve-month period who achieve permanency within those twelve months 34% 24% 44% 23.7% **R**

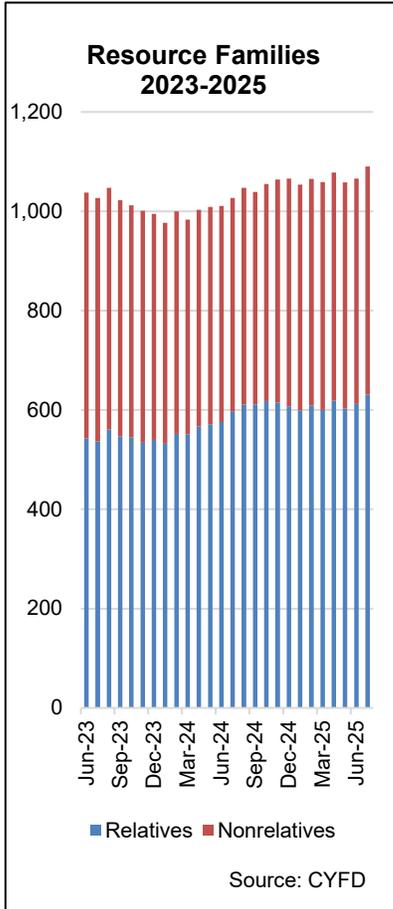
Eligible youth who enrolled in Fostering Connections upon emancipation from foster care 81% 84% 95% 88.8% **Y**

Program Rating **R** **R** **R**

*Measure is classified as explanatory and does not have a target.



Juvenile Justice Services



Over the last decade, the number of youths incarcerated in secure juvenile justice facilities has steadily decreased from the state’s peak as CYFD has implemented evidence-based practices. However, during FY24, the number of youths in secure Juvenile Justice Services (JJS) facilities began increasing, from an average census of 80 in FY23 to 120 in the first quarter of FY26. This increase may be due, in part, to changes CYFD has made to override a validated risk assessment tool and an increase in the number of youths charged with violent crimes, particularly in the 2nd Judicial District. While referrals to JJS increased in the last few years, referrals remain well below pre-pandemic levels. Average daily census remains below capacity in the state’s two secure juvenile justice facilities, the Youth Diagnostic and Development Center in Albuquerque and the J. Paul Taylor Center in Las Cruces. Several metrics reflected positive trends, including completion rates for formal and informal probation and recidivism.

	Budget: \$82,322.6	FTE: 736.5	FY24 Actual	FY25 Actual	FY26 Target	FY26 Q1	Rating
Turnover rate for youth care specialists			34%	27%	25%	32.3%	Y
Percent of clients who successfully complete formal probation			90%	91%	93%	96.4%	Y
Percent of clients who successfully complete informal probation			91%	91%	85%	90.3%	G
Percent of clients successfully completing term of supervised release			Not reported	73%	78%	73%	Y
Number of substantiated complaints by clients of abuse or neglect in juvenile justice facilities			0	5	3	Not reported	R
Percent of youth discharged from active field supervision who did NOT recidivate within two years			87%	85%	80%	85%	G
Rate of physical assaults per one thousand days youth spent in facilities			5.5	5.1	3.8	3.8	G
Percent of discharged from a secure facility who did NOT recidivate in the following two-year period			66%	72%	55%	62.5%	G
Youth served by juvenile justice who are placed in a less-restrictive, community-based setting			94%	94%	94%	93.4%	Y
Percent of clients reviewed at 40 days			Not reported	95%	92%	Not reported	R
Youth aged seventeen and older at time of discharge from a secure facility who obtained a diploma or GED while at the facility			74%	74%	50%	Not reported	
Program Rating			R	Y			Y

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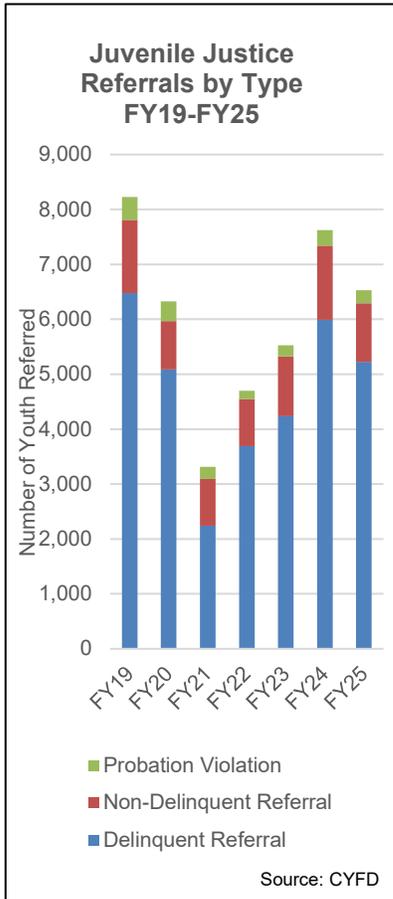
Behavioral Health Services

Within the Behavioral Health Program, performance on key measures related to supporting children’s to access care fell below performance targets. Most notably, in the first quarter of FY26, only 48 percent of Protective Services-involved youth received consultation from a community behavioral health clinician. In 2022, the Legislature appropriated \$20 million for start-up costs for behavioral health providers to establish evidence-based services that would be eligible for Medicaid or federal Title IV-E (foster

care) funding. After being unspent for several years and reauthorized for FY25, less than \$5 million of the appropriation was ultimately spent for the intended purpose.

Budget: \$53,109.2

FTE: 123



Children with at least one electronic benefit transfer service need identified in their CANS assessment who have accessed that service, to include placements that correspond with the recommended level of care

FY24 Actual	FY25 Actual	FY26 Target	FY26 Q1	Rating
Not reported	Not reported	65%	Not reported	N/A

Infant mental health program participants showing improvement developmentally through clinical assessment and observation

93%	89%	95%	82.3%	Y
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Domestic violence program participants who agree or strongly agree that because of their participation in the program as a parent, they have a better understanding of the impact that domestic abuse or violence can have on children

96%	94%	90%	96.3%	G
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Youth age twelve or older in protective services custody who are placed in a less restrictive, community-based setting

85%	72%	73%	Not reported	R
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Domestic violence program participants who agree or strongly agree that staff and advocates regularly discuss their safety needs, including specific things they can do to keep themselves safe

92%	93%	90%	91.3%	G
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Clients enrolled in multisystemic therapy who demonstrate improvement in one or more behavioral health outcomes

92%	93%	90%	94%	G
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Percent of protective services-involved youth in the target population who receive consultation from a community behavioral health clinician

15%	48%	75%	47.5%	R
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Percent of juvenile-justice involved youth in the estimated target population who have received consultation from a community behavioral health clinician

63%	72%	85%	85.6%	G
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Program Rating

Y	Y	Y
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