

## **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 prevent repeat maltreatment that could be expanded and leveraged to garner more federal revenue and improve outcomes.

#### Key Data



- 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 the Plan of Safe Care Statute 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.



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



National Caseloads of Investigations and Alternative Response Workers 2020\*



- Spending on prevention programs 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 has not submitted its plan yet, even though 40 states and Puerto Rico have.
- 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.

- 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 endowments.

## **Performance Challenge: Preventing Repeat Child Maltreatment**

Between FY18 and FY22, Children, Youth and Families Department (CYFD) preventive services expenditures grew from about \$1.1 million to \$11.1 million, a tenfold increase, with most of the increase occurring in the last two years. During the same period, repeat maltreatment decreased from 17 percent to 14 percent, but remains well above the national average of 8 percent. Most of the increase in prevention services spending comes from increased general fund allotments and federal Title IV-B Community-Based Child Abuse Prevention and Promoting Safe and Stable Families grants. While the increase is a welcomed step forward, prevention spending is only 6.6 percent of the total Protective Services budget and much remains to be done.

#### **Maintaining Prevention Momentum**

The state has several opportunities to continue expanding prevention, including by continuing to reinvest savings from reduced foster care caseloads (reduced 32 percent since November 2017) into prevention services, as LFC recommended in the last two budget cycles, and submitting a plan to the federal government as required by the 2018 Families First Prevention Services Act (FFPSA), to allow the state to use federal Title IV-E foster care funding for prevention, which could be substantial depending on how we use it.

According to the National Conference of State Legislatures, 40 other states have submitted their FFPSA plans and 24 of those state's plans are already approved. New Mexico delayed submitting a plan and will likely not submit the plan until at least September 2022. FFPSA provides funding for prevention services for children and families at risk of entering the foster care system by supporting evidence-based efforts for mental health, substance use prevention, treatment services, and in-home parent skill-based services to narrow the number of children and families entering the child welfare system.

#### **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?
- Does CYFD have a long-term strategic plan to reduce repeat child maltreatment?
  - What is the plan?
  - What is the timeline?
- When will CYFD submit its Families First Prevention Services Act (FFPSA) plan to the federal government?
  - What evidence-based services are included in the plan?
  - What Legislative support does CYFD need to ensure the plan is successful?
  - o Other states changed laws to support their plans, will New Mexico need a law change?

# Performance Challenge: Expanding Evidence-Based Prevention and Intervention

During the 2022 Legislative session CYFD and HSD were appropriated \$20 million to develop more behavioral health provider capacity. Additionally, in FY22 and FY23, the Legislature reinvested savings from a 32 percent reduction in foster care caseloads between November 2017 and now, into prevention services totaling \$5.7 million.

As noted in an August LFC Results First program evaluation, the results of cost-benefit analysis indicate that New Mexico can obtain favorable outcomes such as reduced cases of abuse and neglect and reduced out of home placement if evidence-based programs are successfully implemented. These estimates are constructed conservatively to reflect the difficulty that can be encountered when implementing programs at scale.

CYFD is piloting a new alternative response program as required by statute enacted in 2019. 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 and CYFD wants to expand to two additional levels of response for families with greater need.

The graph in the sidebar shows some programs benefits far outweigh their cost. The predicted costs, benefits, and return on investment ratios for each program are calculated as accurately as possible but are, like all projections, subject to some level of uncertainty. Accordingly, it is more important to focus on the relative ranking of programs than small differences between them; some programs are predicted to produce large net benefits and may represent 'best buys' for the state, while others are predicted to generate small or even negative net benefits and may represent neutral or poor investment opportunities.

### **Suggested Questions**

- What would it take to expand CYFD's alternative response or FORCE program to the entire state?
  - What is the timeline?
  - o 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

Chronic workforce shortages plague New Mexico's child welfare system with high demand for social workers, caseworkers, and investigators. 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 into the system have a skills mismatch and leave due to a lack of training. The private sector is also more appealing to many child welfare workers because of better compensation and less stress. Additionally, a 2020 LFC report found CYFD regions with the highest caseloads had the highest rates of short-term placement in foster care and highlighted federal research showing staffing shortages have a detrimental effect on caseworker abilities to make well supported and timely decisions regarding children's safety.

A recent CYFD workforce development plan and survey noted that protective services staff ranked workload, self care, and compensation as the most pressing challenges facing staff. Another highly ranked challenge was related to organizational factors with many respondents feeling that rules, policies, and procedures are not interpreted and applied consistently. The plan also notes the expense of on-baording a new employee of between \$12.8 thousand and \$25.7 thousand. For investigations the department set a goal to not exceed more than 12 active cases per worker by 2023 and estimated it would take an additional 64 FTE to reach this goal. The below table shows FTE needed in other fields.

|                        | Benchmark            | Additional FTE to meet Benchmark |
|------------------------|----------------------|----------------------------------|
| Investigations         | 12 Active Cases      | 64.3                             |
| Permanency<br>Planning | 15 Children          | -32.8                            |
| Placement              | 25 Licensed Families | 54.2                             |
| In-Home Services       | 8 Active Families    | No Estimate                      |
| Total                  |                      | 85.7                             |

Source: CYFD Workforce Development Plan

The National Child Welfare Workforce Institute says the components of a healthy child welfare workforce include manageable workloads, competitive salaries and benefits, positive organizational cultures, access to education and professional development opportunities, effective leadership, strong community partnerships, and inclusivity. The CYFD workforce development plan would address many of these issues. Additionally, the Legislature appropriated \$50 million to higher education institutions to increase social worker endowments.

#### **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?