1	HOUSE BILL 205
2	57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025
3	INTRODUCED BY
4	Meredith A. Dixon and Gail Armstrong and Eleanor Chávez
5	and Rebecca Dow
6	
7	
8	FOR THE LEGISLATIVE FINANCE COMMITTEE
9	
10	AN ACT
11	RELATING TO CHILD WELFARE; CREATING THE SECRETARY OF CHILDREN,
12	YOUTH AND FAMILIES NOMINATING COMMITTEE; REQUIRING THE
13	SECRETARY OF CHILDREN, YOUTH AND FAMILIES TO BE SELECTED FROM A
14	LIST OF QUALIFIED NOMINEES CREATED BY THE NOMINATING COMMITTEE;
15	MOVING RULEMAKING AUTHORITY FOR THE PLAN OF CARE PROCESS FROM
16	THE CHILDREN, YOUTH AND FAMILIES DEPARTMENT TO THE HEALTH CARE
17	AUTHORITY; UPDATING REQUIREMENTS FOR PLANS OF CARE; REQUIRING
18	THE CHILDREN, YOUTH AND FAMILIES DEPARTMENT TO IMPLEMENT THE
19	MULTILEVEL RESPONSE SYSTEM STATEWIDE; ENACTING THE FAMILIES
20	FIRST ACT WITHIN THE CHILDREN'S CODE; REQUIRING THE CHILDREN,
21	YOUTH AND FAMILIES DEPARTMENT TO DEVELOP AND IMPLEMENT A
22	STRATEGIC PLAN FOR APPROVAL BY THE FEDERAL ADMINISTRATION FOR
23	CHILDREN AND FAMILIES; REQUIRING PROVISIONS OF THE STRATEGIC
24	PLAN TO IDENTIFY AND PROVIDE FOSTER CARE PREVENTION SERVICES
25	THAT MEET THE REQUIREMENTS OF THE FEDERAL FAMILY FIRST
	.229811.3

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1 PREVENTION SERVICES ACT; PROVIDING FOR CHILDREN, YOUTH AND 2 FAMILIES DEPARTMENT CONSULTATION WITH THE EARLY CHILDHOOD 3 EDUCATION AND CARE DEPARTMENT, THE HEALTH CARE AUTHORITY AND 4 THE DEPARTMENT OF HEALTH; PROVIDING STRATEGIC PLAN 5 REQUIREMENTS; TRANSFERRING THE SUBSTITUTE CARE ADVISORY COUNCIL 6 FROM THE REGULATION AND LICENSING DEPARTMENT TO THE 7 ADMINISTRATIVE OFFICE OF THE COURTS; DEFINING TERMS IN THE 8 CITIZEN SUBSTITUTE CARE REVIEW ACT; PROVIDING FOR STAFFING OF 9 THE SUBSTITUTE CARE ADVISORY COUNCIL; ESTABLISHING CRITERIA FOR 10 CASE REVIEW; PROVIDING FOR RULES PERTAINING TO VOLUNTEER 11 MEMBERS; PROVIDING ACCESS TO AND REQUIREMENTS FOR 12 CONFIDENTIALITY OF CERTAIN RECORDS AND INFORMATION; CHANGING 13 REPORTING REQUIREMENTS; REQUIRING THE SUBSTITUTE CARE ADVISORY 14 COUNCIL TO PROVIDE THE CHILDREN, YOUTH AND FAMILIES DEPARTMENT 15 WITH CASE REPORTS; REQUIRING THE CHILDREN, YOUTH AND FAMILIES 16 DEPARTMENT TO RESPOND TO CASE REPORTS; REQUIRING THE SUBSTITUTE 17 CARE ADVISORY COUNCIL STAFF AND THE CHILDREN, YOUTH AND 18 FAMILIES DEPARTMENT TO MEET QUARTERLY; TRANSFERRING EMPLOYEES, 19 PROPERTY AND CONTRACTUAL OBLIGATIONS; AMENDING, REPEALING AND 20 ENACTING SECTIONS OF THE NMSA 1978.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 9-2A-3 NMSA 1978 (being Laws 1992, Chapter 57, Section 3) is amended to read:

"9-2A-3. DEFINITIONS.--As used in the Children, Youth and .229811.3 - 2 -

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Families Department Act:

A. "department" means the children, youth and
families department; [and]

B. "nominating committee" means the secretary of children, youth and families nominating committee; and

[B.] C. "secretary" means the secretary of children, youth and families."

SECTION 2. Section 9-2A-6 NMSA 1978 (being Laws 1992, Chapter 57, Section 6) is amended to read:

10 "9-2A-6. SECRETARY OF CHILDREN, YOUTH AND FAMILIES--11 APPOINTMENT.--

A. The chief executive and administrative officer of the department is the "secretary of children, youth and families". The secretary shall be appointed by the governor with the consent of the senate <u>and shall be selected from a</u> <u>list of qualified nominees submitted to the governor by the</u> <u>nominating committee</u>. The secretary shall hold office at the pleasure of the governor and shall serve in the executive cabinet.

B. An appointed secretary shall serve and have all the duties, responsibilities and authority of that office during the period of time prior to final action by the senate confirming or rejecting [his] the appointment."

SECTION 3. A new section of the Children, Youth and Families Department Act, Section 9-2A-6.1 NMSA 1978, is enacted .229811.3

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1 to read: "9-2A-6.1. [NEW MATERIAL] SECRETARY OF CHILDREN, YOUTH 2 AND FAMILIES NOMINATING COMMITTEE.--3 4 The "secretary of children, youth and families Α. 5 nominating committee" is created and consists of nine members 6 who are: 7 knowledgeable about child welfare; (1) 8 not recipients of contracts or other forms (2) 9 of compensation from the department; 10 not applicants or nominees for the (3) 11 secretary position; and 12 appointed as follows: (4) 13 (a) six members appointed one each by 14 the speaker of the house of representatives, the majority floor 15 leader of the house of representatives, the minority floor 16 leader of the house of representatives, the president pro 17 tempore of the senate, the majority floor leader of the senate 18 and the minority floor leader of the senate; 19 (b) two members appointed by the 20 governor; and 21 one member appointed by the chief (c) 22 justice of the supreme court. 23 A nominating committee member shall: Β. 24 (1)be a resident of New Mexico; 25 (2) serve a four-year term; and .229811.3 - 4 -

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(3) serve without compensation, but shall be reimbursed for expenses incurred in pursuit of the member's duties on the nominating committee pursuant to the Per Diem and Mileage Act.

C. The nominating committee and individual members shall be subject to the Governmental Conduct Act, the Inspection of Public Records Act, the Financial Disclosure Act and the Open Meetings Act.

9 D. Administrative support shall be provided to the10 nominating committee by the staff of the department.

E. Initial appointments to the nominating committee shall be made by the appointing authorities prior to July 1, 2026. Subsequent appointments shall be made no later than thirty days before the end of a term.

F. The first meeting of the appointed members of the nominating committee shall be held prior to September 1, 2026. The nominating committee shall select one member to be chair and one member to be secretary of the nominating committee. Following the first meeting, the nominating committee shall meet as often as necessary in order to submit a list to the governor of no fewer than five qualified nominees for appointment as the secretary for the terms beginning January 1, 2027. The list shall be developed to provide geographical diversity, and nominees on the list shall be from at least three different counties of the state.

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G. Subsequent to January 1, 2027, the nominating committee shall meet at least ninety days prior to the date on which the term of the secretary ends and as often as necessary thereafter in order to submit a list to the governor, at least thirty days prior to the beginning of the new term, of no fewer than two qualified nominees from diverse geographical areas of the state for appointment as secretary.

H. Upon the occurrence of a vacancy of the secretary position, the nominating committee shall meet within thirty days of the date of the beginning of the vacancy and as often as necessary thereafter in order to submit a list to the governor, within sixty days of the first meeting after the vacancy occurs, of no fewer than two qualified nominees from diverse geographical areas of the state for appointment as secretary.

I. If a position on the nominating committee becomes vacant during a term, a successor shall be selected in the same manner as the original appointment for that position and shall serve for the remainder of the term of the position vacated.

J. The nominating committee shall actively solicit, accept and evaluate applications and may require an applicant to submit any information the nominating committee deems relevant to the consideration of the individual's application.

K. A majority vote of all members of the nominating .229811.3 - 6 -

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committee in favor of a person is required for that person to be included on the list of qualified nominees submitted to the governor."

Section 9-2A-8 NMSA 1978 (being Laws 1992, SECTION 4. Chapter 57, Section 8, as amended) is amended to read:

"9-2A-8. DEPARTMENT--ADDITIONAL DUTIES.--In addition to other duties provided by law or assigned to the department by the governor, the department shall:

develop priorities for department services and Α. 10 resources based on state policy and national best-practice 11 standards and local considerations and priorities;

strengthen collaboration and coordination in Β. state and local services for children, youth and families by integrating critical functions as appropriate, including service delivery, and contracting for services across divisions and related agencies;

C. develop and maintain a statewide database, including client tracking of services for children, youth and families;

develop standards of service within the D. department that focus on prevention, monitoring and outcomes;

analyze policies of other departments that Ε. affect children, youth and families to encourage common contracting procedures, common service definitions and a uniform system of access;

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1 F. enact [regulations] rules to control disposition 2 and placement of children under the Children's Code, including 3 [regulations] rules to limit or prohibit the out-of-state 4 placement of children, including those who have developmental disabilities or emotional, neurobiological or behavioral 5 disorders, when in-state alternatives are available; 6 7 G. develop reimbursement criteria for licensed 8 child care centers and licensed home providers establishing 9 that accreditation by a department-approved national 10 accrediting body is sufficient qualification for the child care 11 center or home provider to receive the highest reimbursement 12 rate paid by the department;

H. assume and implement responsibility for children's mental health and substance abuse services in the state, coordinating with the [human services department] health care authority and the department of health;

I. assume and implement the lead responsibility among all departments for domestic violence services;

J. implement prevention and early intervention as a departmental focus;

K. conduct biennial assessments of service gaps and needs and establish outcome measurements to address those service gaps and needs, including recommendations from the governor's children's cabinet and the children, youth and families advisory committee;

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L. ensure that behavioral health services provided, including mental health and substance abuse services for children, adolescents and their families, shall be in compliance with requirements of Section [9-7-6.4] <u>24A-3-1</u> NMSA 1978 <u>and any rules adopted pursuant to that section;</u> [and]

<u>M. develop and implement the families first</u> <u>strategic plan for the delivery of services and access to</u> <u>programs as required pursuant to the Families First Act; and</u>

[M.] N. fingerprint and conduct nationwide criminal history record searches on all department employees, staff members and volunteers whose jobs involve direct contact with department clients, including prospective employees and employees who are promoted, transferred or hired into new positions, and the superiors of all department employees, staff members and volunteers who have direct unsupervised contact with department clients."

SECTION 5. Section 32A-1-4 NMSA 1978 (being Laws 1993, Chapter 77, Section 13, as amended) is amended to read:

"32A-1-4. DEFINITIONS.--As used in the Children's Code:

A. "active efforts" means efforts that are affirmative, active, thorough and timely and that represent a higher standard of conduct than reasonable efforts;

B. "adult" means a person who is eighteen years of age or older;

C. "child" means a person who is less than eighteen .229811.3

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D. "council" means the substitute care advisory council established pursuant to Section 32A-8-4 NMSA 1978;

E. "court", when used without further qualification, means the children's court division of the district court and includes the judge, special master or commissioner appointed pursuant to the provisions of the Children's Code or supreme court rule;

9 F. "court-appointed special advocate" means a 10 person appointed pursuant to the provisions of the Children's 11 Court Rules to assist the court in determining the best 12 interests of the child by investigating the case and submitting 13 a report to the court;

G. "custodian" means an adult with whom the child lives who is not a parent or guardian of the child;

H. "department" means the children, youth and families department, unless otherwise specified;

I. "disproportionate minority contact" means the involvement of a racial or ethnic group with the criminal or juvenile justice system at a proportion either higher or lower than that group's proportion in the general population;

J. "federal Indian Child Welfare Act of 1978" means the federal Indian Child Welfare Act of 1978, as that act may be amended or its sections renumbered;

K. "foster parent" means a person, including a
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1 relative of the child, licensed or certified by the department 2 or a child placement agency to provide care for children in the 3 custody of the department or agency; "guardian" means a person appointed as a 4 L. 5 guardian by a court or Indian tribal authority or a person authorized to care for the child by a parental power of 6 7 attorney as permitted by law; 8 "guardian ad litem" means an attorney appointed М. 9 by the children's court to represent and protect the best 10 interests of the child in a case; provided that no party or 11 employee or representative of a party to the case shall be 12 appointed to serve as a guardian ad litem; 13 "Indian" means, whether an adult or child, a Ν. 14 person who is: 15 a member of an Indian tribe; or (1) 16 eligible for membership in an Indian (2) 17 tribe; 18 0. "Indian child" means an Indian person, or a 19 person whom there is reason to know is an Indian person, under 20 eighteen years of age, who is neither: 21 (1) married; or 22 (2) emancipated; 23 Ρ. "Indian child's tribe" means: 24 the Indian tribe in which an Indian child (1) 25 is a member or eligible for membership; or .229811.3 - 11 -

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1 2 member or eligible for membership in more than one tribe, the 3 Indian tribe with which the Indian child has more significant 4 contacts; 5 Q. 6 to tribal law or custom or pursuant to state law: 7 is an adult with legal custody of an (1)8 Indian child; or 9 (2) has been transferred temporary physical 10 care, custody and control by the parent of the Indian child; 11 R. "Indian tribe" means an Indian nation, tribe, 12 pueblo or other band, organized group or community of Indians 13 recognized as eligible for the services provided to Indians by 14 the secretary because of their status as Indians, including an 15 Alaska native village as defined in 43 U.S.C. Section 1602(c) 16 or a regional corporation as defined in 43 U.S.C. Section 1606. 17 For the purposes of notification to and communication with a 18 tribe as required in the Indian Family Protection Act, "Indian 19 tribe" also includes those tribal officials and staff who are 20 responsible for child welfare and social services matters; 21 S. "judge", when used without further 22 qualification, means the judge of the court; 23 Τ. "legal custody" means a legal status created by 24 order of the court or other court of competent jurisdiction or 25 by operation of statute that vests in a person, department or

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(2) in the case of an Indian child who is a

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1 agency the right to determine where and with whom a child shall 2 live; the right and duty to protect, train and discipline the 3 child and to provide the child with food, shelter, personal 4 care, education and ordinary and emergency medical care; the 5 right to consent to major medical, psychiatric, psychological and surgical treatment and to the administration of legally 6 7 prescribed psychotropic medications pursuant to the Children's 8 Mental Health and Developmental Disabilities Act; and the right 9 to consent to the child's enlistment in the armed forces of the 10 United States;

U. "member" or "membership" means a determination made by an Indian tribe that a person is a member of or eligible for membership in that Indian tribe;

V. "parent" or "parents" means a biological or adoptive parent if the biological or adoptive parent has a constitutionally protected liberty interest in the care and custody of the child or a person who has lawfully adopted an Indian child pursuant to state law or tribal law or tribal custom;

W. "permanency plan" means a determination by the court that the child's interest will be served best by:

(1) reunification;

(2) placement for adoption after the parents' rights have been relinquished or terminated or after a motion has been filed to terminate parental rights;

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1 placement with a person who will be the (3) 2 child's permanent guardian; 3 (4) placement in the legal custody of the 4 department with the child placed in the home of a fit and 5 willing relative; or placement in the legal custody of the 6 (5) 7 department under a planned permanent living arrangement; 8 Х. "person" means an individual or any other form 9 of entity recognized by law; 10 "plan of care" means a plan created by a health Υ. 11 care professional intended to ensure the safety and well-being 12 of a substance-exposed newborn, or to provide prenatal support 13 to a pregnant person dealing with substance use disorder, by 14 addressing the treatment needs of the child and any of the 15 child's parents, relatives, guardians, family members or 16 caregivers to the extent those treatment needs are relevant to 17 the safety of the child; 18 Ζ. "preadoptive parent" means a person with whom a 19 child has been placed for adoption; 20 "protective supervision" means the right to AA. 21 visit the child in the home where the child is residing, 22 inspect the home, transport the child to court-ordered 23 diagnostic examinations and evaluations and obtain information 24 and records concerning the child; 25 BB. "relative" means a person related to another

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1 person: 2 (1)by blood within the fifth degree of 3 consanguinity or through marriage by the fifth degree of 4 affinity; or 5 (2) with respect to an Indian child, as established or defined by the Indian child's tribe's custom or 6 7 law; 8 CC. "reservation" means: 9 (1) "Indian country" as defined in 18 U.S.C. 10 Section 1151; 11 (2) any lands to which the title is held by 12 the United States in trust for the benefit of an Indian tribe 13 or individual; or 14 any lands held by an Indian tribe or (3) 15 individual subject to a restriction by the United States 16 against alienation; 17 "reunification" means either a return of the DD. 18 child to the parent or to the home from which the child was 19 removed or a return to the noncustodial parent; 20 "secretary" means the United States secretary EE. 21 of the interior; 22 "tribal court" means a court with jurisdiction FF. 23 over child custody proceedings that is either a court of Indian 24 offenses, a court established and operated under the law or 25 custom of an Indian tribe or any other administrative body that .229811.3 - 15 -

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1 is vested by an Indian tribe with authority over child custody
2 proceedings;

GG. "tribal court order" means a document issued by a tribal court that is signed by an appropriate authority, including a judge, governor or tribal council member, and that orders an action that is within the tribal court's jurisdiction; and

8 HH. "tribunal" means any judicial forum other than9 the court."

SECTION 6. Section 32A-3A-13 NMSA 1978 (being Laws 2019,
Chapter 190, Section 3) is amended to read:

"32A-3A-13. PLAN OF CARE--GUIDELINES--CREATION--DATA SHARING--TRAINING.--

A. By January 1, 2020, the [department] health care authority, in consultation with medicaid managed care organizations, private insurers, the office of superintendent of insurance, the [human services] children, youth and families department and the department of health, shall develop rules to guide hospitals, birthing centers, medical providers, medicaid managed care organizations and private insurers in the care of newborns who exhibit physical, neurological or behavioral symptoms consistent with prenatal drug exposure, withdrawal symptoms from prenatal drug exposure or fetal alcohol spectrum disorder.

B. Rules shall include guidelines to hospitals, .229811.3

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1 birthing centers, medical providers, medicaid managed care 2 organizations and private insurers regarding: 3 (1) participation in the [discharge planning] 4 plan of care development process, [including] which may occur 5 at a prenatal medical visit and shall occur prior to a 6 substance-exposed child's discharge from a hospital. The plan 7 of care development process shall allow for the creation of a 8 written plan of care that shall be sent to: 9 the child's primary care physician; (a) 10 (b) a medicaid managed care organization 11 insurance plan care coordinator who will monitor the 12 implementation of the plan of care after [discharge] the plan 13 of care is created, if the child is insured, or to a care 14 coordinator [in the children's medical services of the family 15 health bureau of the public health division of the department 16 of health] that the authority has contracted with who will 17 monitor the implementation of the plan of care after 18 [discharge] the plan of care is created, if the child is 19 uninsured. The health care authority shall ensure that there 20 is at least one care coordinator available in each birthing 21 hospital in the state at all times and shall contract with care 22 coordinators to ensure that uninsured substance-exposed 23 children receive care coordination; and 24 (c) the child's parent, relative, 25 guardian or caretaker who is present at discharge who shall .229811.3 - 17 -

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receive a copy upon discharge. The plan of care shall be signed by an appropriate representative of the discharging hospital and the child's parent, relative, guardian or caretaker who is present at discharge;

5 definitions and evidence-based screening (2)tools, based on standards of professional practice, to be used 6 7 by health care providers to identify a child born affected by 8 substance use or withdrawal symptoms resulting from prenatal 9 drug exposure or a fetal alcohol spectrum disorder. The rules 10 shall include a requirement that all hospitals, birthing 11 centers and prenatal care providers use the screening, brief 12 intervention and referral to treatment program at all prenatal 13 medical visits and live births;

(3) collection and reporting of data to meet federal and state reporting requirements, including the following:

(a) by hospitals and birthing centers tothe department when: 1) a plan of care has been developed; and2) a family has been referred for a plan of care;

(b) information pertaining to a child
born and diagnosed by a health care professional as affected by
substance abuse, withdrawal symptoms resulting from prenatal
drug exposure or a fetal alcohol spectrum disorder; and
(c) data collected by hospitals and
birthing centers for use by the children's medical services of

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1 the family health bureau of the public health division of the 2 department of health in epidemiological reports and to support 3 and monitor a plan of care. Information reported pursuant to this subparagraph shall be coordinated with communication to 4 5 insurance carrier care coordinators to facilitate access to 6 services for children and parents, relatives, guardians or 7 caregivers identified in a plan of care; 8 identification of appropriate agencies to (4) 9 be included as supports and services in the plan of care, based 10 on an assessment of the needs of the child and the child's 11 relatives, parents, guardians or caretakers, performed by a 12 discharge planner prior to the child's discharge from the 13 hospital or birthing center, which: [may include 14 (a) public health agencies; 15 (b) maternal and child health agencies; 16 (c) home visitation programs; 17 (d) substance use disorder prevention 18 and treatment providers; 19 (e) mental health providers; 20 (f) public and private children and 21 youth agencies; 22 (g) early intervention and developmental 23 services; 24 (h) courts; 25 (i) local education agencies; .229811.3 - 19 -

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1	(j) managed care organizations; or
2	(k) hospitals and medical providers;
3	and]
4	(a) shall include: 1) home visitation
5	programs; and 2) substance use disorder prevention and
6	treatment providers; and
7	(b) may include: 1) public health
8	agencies; 2) maternal and child health agencies; 3) mental
9	health providers; 4) infant mental health providers; 5) public
10	and private children and youth agencies; 6) early intervention
11	and developmental services; 7) courts; 8) local education
12	agencies; 9) managed care organizations; or 10) hospitals and
13	<u>medical providers;</u>
14	(5) engagement of the child's relatives,
15	parents, guardians or caretakers in order to identify the need
16	for access to treatment for any substance use disorder or other
17	physical or behavioral health condition that may impact the
18	safety, early childhood development and well-being of the
18 19	safety, early childhood development and well-being of the child; <u>and</u>
19	child; and
19 20	child; <u>and</u> <u>(6) implementation of plans of care that shall</u>
19 20 21	child; <u>and</u> <u>(6) implementation of plans of care that shall</u> <u>include:</u>
19 20 21 22	child; <u>and</u> <u>(6) implementation of plans of care that shall</u> <u>include:</u> <u>(a) requirements for care coordinators</u>
19 20 21 22 23	child; <u>and</u> <u>(6) implementation of plans of care that shall</u> <u>include:</u> <u>(a) requirements for care coordinators</u> <u>to actively work with pregnant persons or a substance-exposed</u>
19 20 21 22 23 24	child; <u>and</u> <u>(6) implementation of plans of care that shall</u> <u>include:</u> <u>(a) requirements for care coordinators</u> <u>to actively work with pregnant persons or a substance-exposed</u> <u>child's parents, relatives, guardians, family members or</u>

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1 substance-exposed child's parents, relatives, guardians, family members or caregivers to necessary services. Care coordinators 2 shall use an evidence-based intensive care coordination model 3 4 that is listed in the federal Title IV-E prevention services clearinghouse or another nationally recognized evidence-based 5 clearinghouse for child welfare; and 6 7 (b) if a pregnant person or a substanceexposed child's parents, relatives, guardians, family members 8 9 or caregivers are not following the plan of care, requirements 10 that care coordinators make attempts to contact and provide 11 support services to persons who are not following the plan of 12 care. Care coordinators shall attempt to make contact with 13 persons who are not following the plan of care in person, by 14 mail, by phone call and by text message.

C. Reports made pursuant to Paragraph (3) of Subsection B of this section shall be collected by the department as distinct and separate from any child abuse report as captured and held or investigated by the department, such that the reporting of a plan of care shall not constitute a report of suspected child abuse and neglect and shall not initiate investigation by the department or a report to law enforcement.

D. The department shall summarize and report data received pursuant to Paragraph (3) of Subsection B of this section at intervals as needed to meet federal regulations.

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1	E. The [children's medical services of the family
2	health bureau of the public health division of the department
3	of health shall collect and record data reported pursuant to
4	Subparagraph (c) of Paragraph (3) of Subsection B of this
5	section to support and monitor care coordination of plans of
6	care for children born without insurance] health care authority
7	shall provide an annual report to the legislative finance
8	committee, the interim legislative health and human services
9	committee and the department of finance and administration on
10	the status of the plan of care system. The report shall
11	include the following aggregate statistical information related
12	to the creation of plans of care:
13	(1) the primary substances that infants were
14	exposed to;
15	(2) the services that infants and families
16	were referred to;
17	(3) the uptake rate of services;
18	(4) whether an infant or an infant's family
19	was subsequently reported to the children, youth and families
20	department; and
21	(5) demographic and geographic data.
22	F. Reports made pursuant to the requirements in
23	this section shall not be construed to relieve a person of the
24	requirement to report to the department knowledge of or a
25	reasonable suspicion that a child is an abused or neglected
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1 child based on criteria as defined by Section 32A-4-2 NMSA 2 1978.

G. The department and the health care authority shall work in consultation with the department of health to create and distribute training materials to support and educate discharge planners or social workers on the following:

(1)how to assess whether to make a referral to the department pursuant to the Abuse and Neglect Act;

(2)how to assess whether to make a 10 notification to the department pursuant to Subsection B of 11 Section 32A-4-3 NMSA 1978 for a child who has been diagnosed as 12 affected by substance abuse, withdrawal symptoms resulting from 13 prenatal drug exposure or a fetal alcohol spectrum disorder;

(3) how to assess whether to create a plan of care when a referral to the department is not required; and the creation and deployment of a plan of (4)

care. Η.

[No] A person shall not have a cause of action for any loss or damage caused by any act or omission resulting from the implementation of the provisions of Subsection G of this section or resulting from any training, or lack thereof, required by Subsection G of this section.

The training, or lack thereof, required by the I. provisions of Subsection G of this section shall not be construed to impose any specific duty of care."

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SECTION 7. Section 32A-3A-14 NMSA 1978 (being Laws 2019,
 Chapter 190, Section 4) is amended to read:

"32A-3A-14. NOTIFICATION TO THE DEPARTMENT OF NONCOMPLIANCE WITH A PLAN OF CARE.--

5 If the parents, relatives, guardians or Α. 6 caretakers of a child released from a hospital or freestanding 7 birthing center pursuant to a plan of care fail to comply with 8 that plan, the health care authority, a medicaid managed care 9 organization insurance plan care coordinator or a care 10 coordinator contracted with the health care authority shall 11 notify the department [shall be notified] and the department 12 [may] shall conduct a family assessment. Based on the results 13 of the family assessment, the department may offer or provide 14 referrals for counseling, training, or other services aimed at 15 addressing the underlying causative factors that may jeopardize 16 the safety or well-being of the child. The child's parents, 17 relatives, guardians or caretakers may choose to accept or 18 decline any service or program offered subsequent to the family 19 assessment; provided that if the child's parents, relatives, 20 guardians or caretakers decline those services or programs, and 21 the department [may] determines that those services or programs 22 are necessary to address the concerns of potential imminent 23 harm to the child, the department shall proceed with an 24 investigation.

B. As used in this section, "family assessment" .229811.3

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1 means a comprehensive assessment prepared by the department at 2 the time the department receives notification of failure to 3 comply with the plan of care to determine the needs of a child 4 and the child's parents, relatives, guardians or caretakers, 5 including an assessment of the likelihood of: imminent danger to a child's well-being; 6 (1) 7 (2) the child becoming an abused child or 8 neglected child; and 9 the strengths and needs of the child's (3) 10 family members, including parents, relatives, guardians or 11 caretakers, with respect to providing for the health and safety 12 of the child." 13 Section 32A-4-3 NMSA 1978 (being Laws 1993, SECTION 8. 14 Chapter 77, Section 97, as amended) is amended to read: 15 "32A-4-3. DUTY TO REPORT CHILD ABUSE AND CHILD NEGLECT--16 RESPONSIBILITY TO INVESTIGATE CHILD ABUSE OR NEGLECT--PENALTY--17 NOTIFICATION OF PLAN OF CARE .--18 Every person, including a licensed physician; a Α. 19 resident or an intern examining, attending or treating a child; 20 a law enforcement officer; a judge presiding during a 21 proceeding; a registered nurse; a visiting nurse; a school 22 employee; a social worker acting in an official capacity; or a 23 member of the clergy who has information that is not privileged 24 as a matter of law, who knows or has a reasonable suspicion 25 that a child is an abused or a neglected child shall report the .229811.3

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1 matter immediately to:

2 (1) a local law enforcement agency;
3 (2) the department; or
4 (3) a tribal law enforcement or social
5 services agency for any Indian child residing in Indian
6 country.

7 A law enforcement agency receiving the report Β. shall immediately transmit the facts of the report and the 8 9 name, address and phone number of the reporter by telephone to 10 the department and shall transmit the same information in 11 writing within forty-eight hours. The department shall 12 immediately transmit the facts of the report and the name, 13 address and phone number of the reporter by telephone to a 14 local law enforcement agency and shall transmit the same 15 information in writing within forty-eight hours. The written 16 report shall contain the names and addresses of the child and 17 the child's parents, guardian or custodian, the child's age, 18 the nature and extent of the child's injuries, including any 19 evidence of previous injuries, and other information that the 20 maker of the report believes might be helpful in establishing 21 the cause of the injuries and the identity of the person 22 responsible for the injuries. The written report shall be 23 submitted upon a standardized form agreed to by the law 24 enforcement agency and the department.

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C. The recipient of a report under Subsection A of

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this section shall take immediate steps to ensure prompt investigation of the report. The investigation shall ensure that immediate steps are taken to protect the health or welfare of the alleged abused or neglected child, as well as that of any other child under the same care who may be in danger of abuse or neglect. A local law enforcement officer trained in the investigation of child abuse and neglect is responsible for investigating reports of alleged child abuse or neglect at schools, daycare facilities or child care facilities.

If the child alleged to be abused or neglected D. is in the care or control of or in a facility administratively connected to the department, the report shall be investigated by a local law enforcement officer trained in the investigation of child abuse and neglect. The investigation shall ensure that immediate steps are taken to protect the health or welfare of the alleged abused or neglected child, as well as that of any other child under the same care who may be in danger of abuse or neglect.

Ε. A law enforcement agency or the department shall have access to any of the records pertaining to a child abuse or neglect case maintained by any of the persons enumerated in Subsection A of this section, except as otherwise provided in the Abuse and Neglect Act.

F. A person who violates the provisions of Subsection A of this section is guilty of a misdemeanor and .229811.3 - 27 -

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shall be sentenced pursuant to the provisions of Section
 31-19-1 NMSA 1978.

3 G. A finding that a pregnant woman is using or 4 abusing drugs made pursuant to an interview, self-report, 5 clinical observation or routine toxicology screen shall not alone form a sufficient basis to report child abuse or neglect 6 7 to the department pursuant to Subsection A of this section. A 8 volunteer, contractor or staff of a hospital or freestanding 9 birthing center shall not make a report based solely on that 10 finding and shall make a notification pursuant to Subsection H 11 of this section. Nothing in this subsection shall be construed 12 to prevent a person from reporting to the department a 13 reasonable suspicion that a child is an abused or neglected 14 child based on other criteria as defined by Section 32A-4-2 15 NMSA 1978, or a combination of criteria that includes a finding 16 pursuant to this subsection.

H. A volunteer, contractor or staff of a hospital, [or] freestanding birthing center <u>or clinic that provides</u> <u>prenatal care</u> shall:

(1) complete a written plan of care for a substance-exposed newborn <u>or a pregnant person who agrees to</u> <u>creating a plan of care</u>, as provided for by department rule and the Children's Code; and

(2) provide notification to the department and the health care authority. Notification by a health care .229811.3 - 28 -

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1 provider pursuant to this paragraph shall not be construed as a 2 report of child abuse or neglect.

I. As used in this section, "notification" means 3 informing the department and the health care authority that a substance-exposed newborn was born and providing a copy of the plan of care that was created for the child; provided that 7 notification shall comply with federal guidelines and shall not 8 constitute a report of child abuse or neglect.

J. As used in this section, "school employee" includes employees of a school district or a public school."

SECTION 9. Section 32A-4-4.1 NMSA 1978 (being Laws 2019, Chapter 137, Section 2) is amended to read:

"32A-4-4.1. MULTILEVEL RESPONSE SYSTEM.--

The department shall establish a multilevel Α. response system to evaluate and provide services to a child or the family, relatives, caretakers or guardians of a child with respect to whom a report alleging neglect or abuse has been The multilevel response system may include an made. alternative to investigation upon completion of an evaluation that may be completed at intake by the department, the results of which indicate that there is no immediate concern for the child's safety; provided, however, that an investigation shall be conducted for any report:

alleging sexual abuse of a child or (1) serious or imminent harm to a child;

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1 (2) indicating a child fatality; 2 requiring law enforcement involvement, as (3) 3 identified pursuant to rules promulgated by the department; or 4 requiring a specialized assessment or a (4) 5 traditional investigative approach, as determined pursuant to 6 rules promulgated by the department. 7 The department may remove a case from the Β. 8 multilevel response system and conduct an investigation if 9 imminent danger of serious harm to the child becomes evident. 10 The department may reassign a case from investigation to the 11 multilevel response system at the discretion of the department. 12 C. For each family, including the child who is the 13 subject of a report to the department and that child's 14 relatives, caretakers or guardians, that receives services 15 under the multilevel response system, the department shall 16 conduct a family assessment. Based on the results of the 17 family assessment, the department may offer or provide 18 referrals for counseling, training or other services aimed at 19 addressing the underlying causative factors jeopardizing the 20 safety or well-being of the child who is the subject of a 21 report to the department. A family member, relative, caretaker 22 or guardian may choose to accept or decline any services or 23 programs offered under the multilevel response system; 24 provided, however, that if a family member, relative, caretaker 25 or guardian declines services, the department may choose to .229811.3 - 30 -

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1 proceed with an investigation.

D. The department shall employ licensed social
workers to provide services to families, relatives, caretakers
or guardians participating in the multilevel response system to
the extent that licensed social workers are available for
employment.

[E. The department may pilot the multilevel response system prior to statewide implementation.

9 F. The department may limit implementation of the 10 multilevel response system to areas of the state where 11 appropriate services are available and operate the system 12 within available state and federal resources.

G.] E. The department shall:

(1) provide an annual report of system implementation and outcomes to the legislative finance committee, <u>the interim legislative health and human services</u> <u>committee, the interim committee that studies courts,</u> <u>corrections and justice</u> and the department of finance and administration as part of the department's budget submission;

(2) arrange for an independent evaluation of the multilevel response system, including examining outcomes for child safety and well-being and cost-effectiveness;

(3) incorporate the multilevel response system
into the department's quality assurance review process;

(4) develop performance measures, as provided.229811.3

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1 in the Accountability in Government Act, for the multilevel 2 response system; and

3 implement the multilevel response system (5) 4 statewide no later than July 1, [2022, if the department pilots 5 or otherwise geographically limits the multilevel response 6 system, submit a plan to the legislative finance committee and 7 the department of finance and administration setting forth how 8 the system could be expanded statewide, including a plan to 9 address service availability, and identifying costs that would 10 be incurred by the department] 2027.

[H.] F. The department shall promulgate rules to implement the provisions of this section.

[I.] <u>G.</u> As used in this section, "family assessment" means a comprehensive, evidence-based assessment tool used by the department to determine the needs of a child and the child's family, relatives, caretakers or guardians at the time the department receives a report of child abuse and neglect, including an assessment of the likelihood of:

the child becoming an abused child or a (2) neglected child; and

imminent danger to a child's well-being;

the strengths and needs of the child's (3) family members, relatives, caretakers or guardians with respect to providing for the health and safety of the child."

SECTION 10. A new section of the Children's Code is .229811.3 - 32 -

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"[<u>NEW MATERIAL</u>] SHORT TITLE.--Sections 10 through 13 of this act may be cited as the "Families First Act"."

SECTION 11. A new section of the Children's Code is enacted to read:

"[<u>NEW MATERIAL</u>] DEFINITIONS.--As used in the Families First Act:

A. "families first services" means foster care prevention services categorized pursuant to the federal Title IV-E prevention services clearinghouse as well-supported, supported or promising that are included in the families first strategic plan implemented pursuant to the Families First Act and are provided by the department through the implementation of that strategic plan; and

B. "families first strategic plan" means the plan required pursuant to the Families First Act that is developed and implemented by the department in accordance with the regulations and requirements set forth in the federal Family First Prevention Services Act."

SECTION 12. A new section of the Children's Code is enacted to read:

"[<u>NEW MATERIAL</u>] FAMILIES FIRST STRATEGIC PLAN--DEPARTMENT DUTIES--FAMILIES FIRST SERVICES--TIME LINE--IMPLEMENTATION.--

A. In consultation with the early childhood education and care department, the health care authority and .229811.3 - 33 -

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1 the department of health, the department shall develop and 2 implement the families first strategic plan. In developing the 3 families first strategic plan, the department shall: 4 (1) ensure that provisions of the families 5 first strategic plan align with and meet the requirements set forth in the federal Family First Prevention Services Act; and 6 7 (2) maximize resources from the federal government under Title IV-E that are available to the 8 9 department to provide families first services. 10 Β. The families first strategic plan required 11 pursuant to Subsection A of this section shall: 12 include a comprehensive description of the (1) department's responsibilities and duties for providing families 13 14 first services; 15 include a comprehensive and detailed list (2) 16 of each of the families first services the department will 17 provide to eligible persons and affirm that each service to be 18 provided: 19 (a) is eligible for reimbursement 20 pursuant to the federal Family First Prevention Services Act; 21 and 22 is rated as promising, supported or (b) 23 well-supported in accordance with the Title IV-E prevention 24 services clearinghouse; 25 identify all network services providers, (3) .229811.3 - 34 -

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1	including other state agencies, that the department will use
2	for providing families first services. If services are
3	provided by another state agency, the department, together with
4	the other state agency, shall establish safety monitoring
5	protocols for direct monitoring of the services provided by
6	that agency and, for each provider used by the department, list
7	the specific families first service that the network services
8	provider will provide, including:
9	(a) mental health or substance abuse
10	prevention and treatment;
11	(b) in-home parent skill-based programs;
12	(c) kinship navigator programs; or
13	(d) any other programs or services that
14	are eligible or become eligible for reimbursement pursuant to
15	the federal Family First Prevention Services Act;
16	(4) identify and define the population of
17	eligible persons who may receive families first services and
18	include, at a minimum:
19	(a) a child who is a candidate for
20	foster care but who can remain safely at home with the
21	provision of evidence-based services;
22	(b) a parent, guardian or caregiver of a
23	child at risk of entering foster care;
24	(c) a pregnant or parenting youth in
25	foster care; and
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1	(d) other eligible persons identified by
2	the department;
3	(5) identify processes and procedures to be
4	established and followed by the department to determine
5	eligibility for any families first service;
6	(6) identify processes and procedures to be
7	established and followed by the department to maximize federal
8	reimbursements, funding and resources available to the
9	department to provide families first services;
10	(7) identify the process that the department
11	will use to monitor and oversee the safety of children who
12	receive families first services and programs, as required by
13	the federal Family First Prevention Services Act;
14	(8) establish appropriate metrics the
15	department will use to determine and evaluate outcomes from the
16	department's providing of families first services pursuant to
17	the Families First Act, including outcomes related specifically
18	to subsequent substantiated reports of maltreatment and the
19	numbers of children entering foster care;
20	(9) establish an appropriate time line and
21	strategy for providing families first services statewide. The
22	time line shall include the following:
23	(a) no later than June 30, 2027, the
24	department shall provide families first services through a
25	pilot program that is designed for implementation considering
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1 factors such as county population density and rates of child 2 maltreatment and repeat maltreatment; and 3 (b) no later than June 30, 2032, the department shall provide statewide implementation of families 4 5 first services rolled out in a manner consistent with the best practices derived from the evaluation of the observation, 6 7 experiences and discernible outcomes of the pilot program; 8 (10) provide a detailed description of how the 9 department will continuously monitor the families first 10 strategic plan, from development of the plan through the pilot 11 program phase and to statewide implementation. Included in 12 that description shall be how the department will monitor key 13 factors likely to best ensure fidelity to the service model 14 developed within the families first strategic plan; and 15 establish the appropriate information to (11) 16 include in an annual report to be provided by the department to 17 the legislative finance committee, the interim legislative 18 health and human services committee and the governor. At a 19 minimum, the annual report shall include the following 20 information: 21 an up-to-date inventory of all (a) 22 families first services available; 23 data, without inclusion of personal (b) 24 identifier information, regarding the uptake and program 25 completion among eligible individuals of families first .229811.3

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1 services, including the area of the state in which the services
2 were accessed;

3 (c) performance results regarding 4 identified outcome measures, to include aggregate data about 5 child participant placement status at the beginning of services and one year after services and whether the child entered 6 7 foster care within two years after being determined a candidate 8 for foster care and receiving families first services; and 9 fiscal information regarding program (d) 10 and service expenditures and disaggregating state and federal 11 revenue sources.

C. For the purposes of this subsection, "approving authority" means the federal administration for children and families. The department shall:

(1) no later than August 1, 2025, finalize the provisions of the families first strategic plan, post the plan to the department's website and provide a copy of the plan to the legislative finance committee, the interim legislative health and human services committee and the governor;

(2) no later than September 1, 2025:
(a) submit the families first strategic
plan to the approving authority for approval; and
(b) begin providing families first
services pursuant to the provisions of the Families First Act;
(3) if a submitted strategic plan is not

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1 approved and the approving authority indicates that to secure 2 an approval, the strategic plan must be revised, as soon as 3 practicable:

(a) revise the families first strategicplan in accordance with the revisions required by the approvingauthority; and

(b) submit the revised strategic plan to the approving authority; and

9 include in the department's reports (4) 10 required pursuant to the Families First Act the status of each 11 families first strategic plan submitted to the approving 12 authority for approval, including any specific revisions 13 required, the dates of submissions and the dates of approval or 14 nonapproval by the approving authority for each submitted 15 strategic plan and any other relevant information related to 16 the status of a families first strategic plan submitted to the 17 approving authority by the department.

D. No later than July 1, 2026, and by each July 1 thereafter, the department shall post the annual report as established in the families first strategic plan pursuant to the Families First Act to the department's website, and the department shall submit the annual report to the legislative finance committee, the interim legislative health and human services committee and the governor."

SECTION 13. A new section of the Children's Code is .229811.3

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1 enacted to read:

2	"[<u>NEW MATERIAL</u>] RULESBy August 1, 2027, the department
3	shall promulgate and adopt rules as necessary to carry out the
4	provisions of the Families First Act."
5	SECTION 14. Section 32A-4-21 NMSA 1978 (being Laws 1993,
6	Chapter 77, Section 115, as amended) is amended to read:
7	"32A-4-21. NEGLECT OR ABUSE PREDISPOSITION STUDIES,
8	REPORTS AND EXAMINATIONSSUPPORT SERVICES
9	A. Prior to holding a dispositional hearing, the
10	court shall direct that a predisposition study and report be
11	submitted in writing to the court by the department.
12	B. The predisposition study required pursuant to
13	Subsection A of this section shall contain the following
14	information:
15	(1) a statement of the specific reasons for
16	intervention by the department or for placing the child in the
17	department's custody and a statement of the parent's ability to
18	care for the child in the parent's home without causing harm to
19	the child;
20	(2) a statement of how an intervention plan is
21	designed to achieve placement of the child in the least
22	restrictive setting available, consistent with the best
23	interests and special needs of the child, including a statement
24	of the likely harm the child may suffer as a result of being
25	removed from the parent's home, including emotional harm that
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may result due to separation from the child's parents, and a statement of how the intervention plan is designed to place the child in close proximity to the parent's home without causing harm to the child due to separation from parents, siblings or any other person who may significantly affect the child's best interest;

(3) the wishes of the child as to the child's
custodian;

9 (4) a statement of the efforts the department
10 has made to identify and locate all grandparents and other
11 relatives and to conduct home studies on any appropriate
12 relative expressing an interest in providing care for the
13 child, and a statement as to whether the child has a family
14 member who, subsequent to study by the department, is
15 determined to be qualified to care for the child;

(5) a description of services offered to the child, the child's family and the child's foster care family, which, if appropriate and available, may include families first services provided pursuant to the Families First Act, as well as referrals to income support or other services or programs, and a summary of reasonable efforts made to prevent removal of the child from the child's family or reasonable efforts made to reunite the child with the child's family;

(6) a description of the home or facility in
which the child is placed and the appropriateness of the
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l child's placement;

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(7) the results of any diagnostic examinationor evaluation ordered at the custody hearing;

4 (8) a statement of the child's medical and
5 educational background;

6 (9) a case plan that sets forth steps to
7 ensure that the child's physical, medical, cultural,
8 psychological and educational needs are met and that sets forth
9 services to be provided to the child and the child's parents to
10 facilitate permanent placement of the child in the parent's
11 home;

(10) for children sixteen years of age and older, a plan for developing the specific skills the child requires for successful transition into independent living as an adult, regardless of whether the child is returned to the child's parent's home;

(11) a case plan that sets forth steps to ensure that the child's educational needs are met and, for a child fourteen years of age or older, a case plan that specifically sets forth the child's educational and postsecondary goals; and

(12) a description of the child's foster care placement and whether it is appropriate in terms of the educational setting and proximity to the school the child was enrolled in at the time of the placement, including plans for .229811.3

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travel for the child to remain in the school in which the child was enrolled at the time of placement, if reasonable and in the child's best interest.

C. A copy of the predisposition report shall be provided by the department to counsel for all parties five days before the dispositional hearing.

If the child is an adjudicated abused child, any D. temporary custody orders shall remain in effect until the court has received and considered the predispositional study at the dispositional hearing."

SECTION 15. Section 32A-4-33 NMSA 1978 (being Laws 1993, Chapter 77, Section 127, as amended) is amended to read: "32A-4-33. CONFIDENTIALITY--RECORDS--PENALTY.--

A. All records or information concerning a party to a neglect or abuse proceeding, including social records, diagnostic evaluations, psychiatric or psychological reports, videotapes, transcripts and audio recordings of a child's statement of abuse or medical reports incident to or obtained as a result of a neglect or abuse proceeding or that were produced or obtained during an investigation in anticipation of or incident to a neglect or abuse proceeding shall be confidential and closed to the public.

The records described in Subsection A of this Β. section shall be disclosed only to the parties and:

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(1) court personnel and persons or entities

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1 authorized by contract with the court to review, inspect or 2 otherwise have access to records or information in the court's 3 possession; 4 (2) court-appointed special advocates 5 appointed to the neglect or abuse proceeding; 6 (3) the child's guardian ad litem; 7 the attorney representing the child in an (4) abuse or neglect action, a delinquency action or any other 8 9 action under the Children's Code; 10 department personnel and persons or (5) 11 entities authorized by contract with the department to review, 12 inspect or otherwise have access to records or information in 13 the department's possession; 14 [any local substitute care review board or (6) 15 any agency contracted to implement local substitute care review 16 boards] a staff member of the substitute care advisory council, 17 if the records are requested for the purpose of carrying out 18 the provisions of the Citizen Substitute Care Review Act; 19 (7) law enforcement officials, except when use 20 immunity is granted pursuant to Section 32A-4-11 NMSA 1978; 21 district attorneys, except when use (8) 22 immunity is granted pursuant to Section 32A-4-11 NMSA 1978; 23 any state government or tribal government (9) 24 social services agency in any state or when, in the opinion of 25 the department, it is in the best interest of the child, a .229811.3 - 44 -

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1	governmental social services agency of another country;
2	(10) a foster parent, if the records are those
3	of a child currently placed with that foster parent or of a
4	child being considered for placement with that foster parent
5	and the records concern the social, medical, psychological or
6	educational needs of the child;
7	(11) school personnel involved with the child
8	if the records concern the child's social or educational needs;
9	(12) a grandparent, parent of a sibling,
10	relative or fictive kin, if the records or information pertain
11	to a child being considered for placement with that
12	grandparent, parent of a sibling, relative or fictive kin and
13	the records or information concern the social, medical,
14	psychological or educational needs of the child;
15	(13) health care or mental health
16	professionals involved in the evaluation or treatment of the
17	child or of the child's parents, guardian, custodian or other
18	family members;
19	(14) protection and advocacy representatives
20	pursuant to the federal Developmental Disabilities Assistance
21	and Bill of Rights Act and the federal Protection and Advocacy
22	for Mentally Ill Individuals Amendments Act of 1991;
23	(15) children's safehouse organizations
24	conducting investigatory interviews of children on behalf of a
25	law enforcement agency or the department;
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(16) representatives of the federal government or their contractors authorized by federal statute or regulation to review, inspect, audit or otherwise have access to records and information pertaining to neglect or abuse proceedings;

(17) any person or entity attending a meeting arranged by the department to discuss the safety, well-being and permanency of a child, when the parent or child, or parent or legal custodian on behalf of a child younger than fourteen years of age, has consented to the disclosure; and

(18) any other person or entity, by order of the court, having a legitimate interest in the case or the work of the court.

C. A parent, guardian or legal custodian whose child has been the subject of an investigation of abuse or neglect where no petition has been filed shall have the right to inspect any medical report, psychological evaluation, law enforcement reports or other investigative or diagnostic evaluation; provided that any identifying information related to the reporting party or any other party providing information shall be deleted. The parent, guardian or legal custodian shall also have the right to the results of the investigation and the right to petition the court for full access to all department records and information except those records and information the department finds would be likely to endanger .229811.3

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1 the life or safety of any person providing information to the 2 department.

D. Whoever intentionally and unlawfully releases any information or records closed to the public pursuant to the Abuse and Neglect Act or releases or makes other unlawful use of records in violation of that act is guilty of a petty misdemeanor and shall be sentenced pursuant to the provisions of Section 31-19-1 NMSA 1978.

E. The department shall promulgate rules for implementing disclosure of records pursuant to this section and in compliance with state and federal law and the Children's Court Rules."

SECTION 16. Section 32A-8-2 NMSA 1978 (being Laws 1993, Chapter 77, Section 204, as amended) is amended to read:

"32A-8-2. PURPOSE OF ACT.--The purpose of the Citizen Substitute Care Review Act is to provide a permanent system for independent and objective monitoring [of children placed in the custody] of the department by examining the policies, procedures and practices of the department and, where appropriate, specific cases to evaluate [the extent to which the department is effectively] its effectiveness in discharging its child protection responsibilities <u>and to meet federal</u> requirements for citizen review panels under the federal Child <u>Abuse Prevention and Treatment Act</u>."

SECTION 17. A new section of the Citizen Substitute Care .229811.3 - 47 -

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1 Review Act is enacted to read: 2 "[NEW MATERIAL] DEFINITIONS.--As used in the Citizen Substitute Care Review Act: 3 4 "board" means a substitute care review board of Α. 5 volunteer members facilitated by council staff convened for the 6 purpose of reviews of designated cases or other related 7 activities deemed appropriate by the council; 8 "case" means an abuse or neglect case referred Β. 9 to the department; 10 C. "council" means the substitute care advisory 11 council; 12 D. "identified adult" means an adult participating 13 in the fostering connections program or that program's 14 successor: 15 "identified child" means a child who is: Ε. 16 the subject of a referral of abuse and (1)17 neglect made to the department; 18 (2) receiving services from the department; or 19 (3) in the custody of the department due to 20 abuse and neglect proceedings; 21 "public member" means an individual who has been F. 22 appointed by the governor; 23 G. "substitute care" means custodial or residential 24 care for an identified child that is ordered or otherwise 25 sanctioned by the court and in which the child does not live .229811.3 - 48 -

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with either of the child's birth parents. "Substitute care" includes foster care, kinship care or care within a group home, residential treatment center, juvenile justice facility, semiindependent living program or emergency shelter; and

H. "volunteer member" means an individual who has met eligibility requirements to perform volunteer services for the council."

SECTION 18. Section 32A-8-4 NMSA 1978 (being Laws 1993, Chapter 77, Section 206, as amended) is amended to read:

"32A-8-4. SUBSTITUTE CARE ADVISORY COUNCIL--MEMBERS--COMPENSATION--RESPONSIBILITIES--ADVISORY COMMITTEE.--

A. The "substitute care advisory council" is created [and, in accordance with the provisions of Section 9-1-7 NMSA 1978, is administratively attached to the regulation and licensing department. The general purpose of the council is to oversee substitute care review boards in their monitoring of children placed in the custody of the children, youth and families department to identify systemic policy issues regarding substitute care] in the administrative office of the courts. The council shall exercise its functions independently and not under the control of the administrative office of the courts. The council shall be composed of [nine persons] ten voting members, including:

24 (1) the secretary of public education or the 25 secretary's designee;

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1 the secretary of [human services] health (2) 2 care authority or the secretary's designee; 3 the secretary of finance and (3) 4 administration or the secretary's designee; 5 the secretary of health or the secretary's (4) 6 designee; 7 [(5) two public members, appointed by the 8 governor, who: 9 (a) are at least eighteen and no more 10 than thirty years of age at the time of appointment; and 11 (b) were previously placed in substitute 12 care; 13 (6) two public members, appointed by the 14 governor, who have expertise in the area of child welfare; and] 15 (5) the secretary of early childhood education 16 and care or the secretary's designee; 17 [(7)] (6) one children's court judge, 18 appointed by the governor; and 19 (7) four public members, two of whom have 20 expertise in the area of child welfare and two of whom have had 21 experience in abuse and neglect proceedings, including former 22 foster youth, biological parents, foster parents and adoptive 23 parents. 24 [The council may hire staff and contract for Β. 25 services to carry out the purposes of the Citizen Substitute .229811.3 - 50 -

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Care Review Act.] The secretary of children, youth and families or the secretary's designee shall serve as a nonvoting member.

<u>C.</u> Except as provided pursuant to Paragraph [(7)] (6) of Subsection A <u>and Subsection B</u> of this section, a person or a relative of a person employed by the department or a district court shall not serve on the council.

[G.] D. Terms of office of public members of the council shall be three years. Public members shall be eligible for reappointment. In the event that a vacancy occurs among the members of the council, the governor shall appoint another person to serve the unexpired portion of the term.

E. A member of the council shall be entitled to receive per diem and mileage as provided for nonsalaried public officers pursuant to the Per Diem and Mileage Act; provided that, if a different provision of that act applies to a member, that member shall be paid pursuant to that provision. A member of the council shall receive no other compensation, perquisite or allowance.

 $[\overline{D_{\cdot}}]$ <u>F.</u> The council shall select a chairperson, a vice chairperson and other officers as it deems necessary.

[E.] <u>G.</u> The council shall meet no less than [twice annually] <u>quarterly</u> and more frequently upon the call of the chairperson.

H. The council shall, on or before October 1 of each year, designate cases for review that involve children in .229811.3 - 51 -

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1 substitute care who: 2 (1) are under the age of five; or (2) have remained in substitute care for 3 4 longer than six months. I. The council may establish work groups and enter 5 6 into contracts, memoranda of understanding and joint powers 7 agreements to carry out the provisions of the Citizen Substitute Care Review Act. 8 9 [F.] J. The council shall adopt reasonable rules 10 relating to the functions and procedures of [the substitute 11 care review boards and] the council [in accordance with the 12 duties of the boards as provided in the Citizen Substitute Care 13 These rules shall establish: Review Act1. 14 [(1) establish training requirements for substitute care review board members: 15 16 (2) establish criteria for council designation 17 of cases for substitute care review board review; 18 (3) establish procedures for substitute care 19 review board review of designated cases; 20 (4) establish criteria for membership and 21 tenure on and operating procedures for substitute care review 22 boards; 23 (5) specify the information needed for 24 designated cases to be monitored by substitute care review 25 boards; and .229811.3 - 52 -

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1	(6) specify case information to be tracked and
2	reported to the council.
3	G. When adopting rules establishing criteria for
4	designation of cases for substitute care review board review,
5	the council shall weigh the importance of the following
6	factors, including:
7	(1) sibling placements;
8	(2) the frequency and severity of neglect or
9	abuse;
10	(3) the behavioral health status of household
11	members;
12	(4) the placement of children in households
13	where there are no relatives of the children;
14	(5) data related to demographics; and
15	(6) relevant trend data]
16	(1) procedures to ensure compliance with the
17	<u>Open Meetings Act;</u>
18	(2) initial and annual training requirements
19	<u>for council staff;</u>
20	(3) requirements for public participation,
21	including participation on work groups and boards;
22	(4) procedures for the council's review of
23	designated cases;
24	(5) procedures to provide for public outreach
25	and public comment to assess the impact of current child
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1 protection procedures and practices on children and families in 2 the community; and 3 (6) other procedures to provide for compliance 4 with the Citizen Substitute Care Review Act and the federal Child Abuse Prevention and Treatment Act as it relates to 5 citizen review panels. 6 7 [H.] K. The council shall [review and coordinate the activities of the substitute care review boards and make a 8 9 report with its recommendations to the department, the courts 10 and the appropriate legislative interim committees] provide 11 periodic reports on the work of the council, including an 12 annual written report to the governor, the appropriate 13 legislative interim committee studying courts, corrections and 14 justice, the legislative finance committee, the legislative 15 health and human services committee, the department, the 16 administrative office of the courts and other persons, 17 organizations or agencies deemed appropriate. The annual 18 report shall be distributed electronically on or before 19 November 1 of each year [regarding statutes, rules, policies 20 and procedures relating to substitute care]. This report shall 21 include [recommendations for any changes to substitute care 22 review boards.

I. Council members shall receive per diem and mileage as provided for nonsalaried public officers in the Per Diem and Mileage Act; provided that, if a different provision .229811.3

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1	of that act applies to a specific member, that member shall be
2	paid pursuant to that applicable provision. Members shall
3	receive no other compensation, perquisite or allowance.
4	J. The council shall appoint by October 1 of each
5	year a six-member advisory committee from a list of substitute
6	care review board members that the substitute care review
7	boards shall nominate. The advisory council shall meet with
8	the council at least once per year to advise the council on
9	matters relating to substitute care review. Advisory committee
10	members shall serve terms of one year and may be reappointed] <u>a</u>
11	summary of the activities of the council and recommendations to
12	improve child protective services at the state and local
13	levels. Other reports regarding trends or topics deemed
14	necessary by the council may be provided to the governor, the
15	legislature, the department and the administrative office of
16	the courts."
17	SECTION 19. A new section of the Citizen Substitute Care
18	Review Act is enacted to read:
19	"[<u>NEW MATERIAL</u>] COUNCIL ADMINISTRATIONSTAFFING
20	A. The council shall hire a director who:
21	(1) shall oversee, manage and direct
22	processing of cases filed or reviewed pursuant to the Citizen
23	Substitute Care Review Act, provide administrative support to
24	the council and conduct any other activities as deemed
25	necessary by the council to support its functions;

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1 shall act impartially in a nonpartisan (2) 2 manner: 3 shall promote public awareness of the (3) 4 purpose and services of the council and the methods for 5 submitting requests for case review; shall employ staff for the council and fix 6 (4) 7 compensation of the staff; 8 shall prepare a budgetary request to be (5) 9 submitted through the administrative office of the courts; and 10 (6) may apply for and accept grants, gifts and 11 bequests from other states, federal and interstate agencies, 12 independent authorities, private firms, individuals and 13 foundations for the purpose of carrying out the 14 responsibilities of the council. 15 The director shall possess the following Β. 16 qualifications: 17 (1) a master's degree in social work and 18 possession of a license issued pursuant to the Social Work 19 Practice Act; or 20 an active license to practice law issued (2) 21 pursuant to rules promulgated by the supreme court; and 22 at least five years' experience in child (3) 23 welfare, with an emphasis on child abuse and neglect prevention 24 or abatement. 25 C. The director shall hire staff to carry out the .229811.3 - 56 -

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purposes of the Citizen Substitute Care Review Act, including 2 review of cases. Council staff providing professional services 3 shall possess:

4 (1) a bachelor's degree in social work, 5 psychology, guidance and counseling, education, sociology, 6 criminal justice, criminology or family studies and at least 7 two years of experience in child welfare administration with an 8 emphasis on child abuse and neglect prevention or abatement; or 9 at least four years of experience combined (2)

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11 (a) study at an accredited college or 12 university in a field related to child welfare; or 13

(b) professional experience working in the field of child welfare.

Council staff shall be required to complete D. annual training directly relating to enhancing staff proficiency, meeting job requirements and conducting case reviews required pursuant to the Citizen Substitute Care Review Act."

SECTION 20. A new section of the Citizen Substitute Care Review Act is enacted to read:

"[<u>NEW MATERIAL</u>] ATTORNEY GENERAL REPRESENTATION AND CONSULTATION .-- The attorney general shall advise and consult with the council, acting pursuant to the Citizen Substitute Care Review Act, and render legal services upon request of the .229811.3 - 57 -

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council."

SECTION 21. A new section of the Citizen Substitute Care 2 3 Review Act is enacted to read: 4 "[NEW MATERIAL] VOLUNTEER MEMBER PARTICIPATION--RULES.--5 The council shall promulgate rules relating to Α. volunteer member participation, which shall include provisions 6 7 for: efforts to recruit and retain volunteer 8 (1) 9 members who are broadly representative of the communities in 10 which they serve and to include volunteer members with 11 expertise in the prevention and treatment of child abuse and 12 neglect and adult former victims of child abuse or neglect; 13 (2) a membership process that includes 14 background checks and orientation training; 15 ongoing training requirements; (3) 16 procedures to address actual, perceived or (4) 17 possible conflicts of interest; 18 (5) a code of conduct; and 19 (6) procedures to maintain confidentiality of 20 information required to be kept confidential as required by 21 law. 22 Each volunteer member who meets the requirements Β. 23 established by council rules shall participate at least once 24 quarterly in case reviews and other activities deemed 25 appropriate by council staff. .229811.3 - 58 -

1 C. Volunteer members may receive per diem and 2 mileage as provided for nonsalaried public officers in the Per 3 Diem and Mileage Act; provided that if a different provision of 4 that act applies to a specific member, that member shall be 5 paid pursuant to that applicable provision. Members shall 6 receive no other compensation, perquisite or allowance." 7 SECTION 22. A new section of the Citizen Substitute Care Review Act is enacted to read: 8 9 "[NEW MATERIAL] SUBSTITUTE CARE REVIEW BOARD 10 ESTABLISHMENT--CASE REVIEW.--11 Α. The council shall establish boards composed 12 entirely of volunteer members to review cases designated in 13 accordance with council rules. 14 When a case has been designated for review Β. 15 pursuant to Subsection H of Section 32A-8-4 NMSA 1978, the 16 staff of the council shall convene a board to review the case. 17 C. If a case reviewed by a board is a children's 18 court case, the staff of the council shall give the parties to 19 the case notice of the review and afford the parties to the 20 case an opportunity to provide input relevant to the review. 21 If the case involves an Indian child, notice shall additionally 22 be provided to persons afforded notice pursuant to the Indian 23 Family Protection Act. 24 After a board's review of a children's court D.

case, council staff shall submit a report of the board's .229811.3

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1 findings and recommendations to the children's court, the 2 department and the parties to the case. If the case involves 3 an Indian child, the report shall additionally be provided to 4 persons afforded notice pursuant to the Indian Family 5 Protection Act. 6 Ε. The department shall: 7 acknowledge receipt of the report within (1) 8 ten business days; and 9 (2) within thirty days of receipt, provide a 10 response to the board's findings and recommendations, including 11 plans for adopting the recommendations or taking alternative 12 action. 13 Council staff and the department shall meet F. 14 quarterly, or as needed to work toward mutually agreed-upon 15 outcomes." 16 SECTION 23. A new section of the Citizen Substitute Care 17 Review Act is enacted to read: 18 "[NEW MATERIAL] ACCESS TO RECORDS.--19 Α. Subject to state or federal law to the contrary, 20 council staff shall have access to, including the right to 21 inspect and copy, any records necessary to carry out council 22 responsibilities, including access to the following: 23 social records, diagnostic evaluations, (1)24 psychiatric or psychological reports, video footage, 25 transcripts and audio records of a child's statement of abuse .229811.3 - 60 -

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1	or medical reports incident to an abuse or neglect proceeding;
2	(2) a record of an agency, hospital,
3	organization, school, person or office, including the clerk of
4	the court, the department, a court-appointed special advocate
5	program, a public or private health care facility, a medical or
6	mental health care professional, a law enforcement agency or
7	other agency that provides services to children and families;
8	(3) a record of an administrative hearing
9	conducted by the department and any findings or conclusions
10	resulting from such hearing; and
11	(4) a record of a private meeting with a child
12	in protective custody or with an individual with knowledge of
13	the case or grievance.
14	B. The department shall establish procedures to
15	provide the requested records in a timely manner.
16	C. The department shall:
17	(1) establish procedures to provide the
18	requested records in a timely manner and to ensure staff
19	availability to provide input for case reviews; and
20	(2) ensure that its agents and contractors
21	provide requested records in a timely manner and ensure staff
22	availability to provide input for case reviews.
23	D. The department or its agent or contractor shall
24	not discharge, discriminate against in any manner or retaliate
25	against an employee, volunteer or contractor who, in good
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faith, communicates with the council about a case review or provision of records pursuant to this section."

SECTION 24. A new section of the Citizen Substitute Care Review Act is enacted to read:

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"[<u>NEW MATERIAL</u>] CONFIDENTIALITY OF INFORMATION .--

A. Information obtained or generated by a member of the council, a staff member of the council or a member of a board for the purpose of performing duties in compliance with the Citizen Substitute Care Review Act is not subject to the provisions of the Inspection of Public Records Act.

B. The name, address or other personally identifiable information of a person whose records are released to council staff are confidential.

C. A member of the council, a staff member of the council or a member of a board with knowledge of a case that was obtained pursuant to the Citizen Substitute Care Review Act shall maintain that information as confidential unless:

(1) the identified child or identified adultwho is the subject of the case consents in writing todisclosure of that information to another person;

(2) the identified child or identified adult who is the subject of the case provides oral consent for disclosure to another person that is immediately documented in writing by council staff; or

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(3) disclosure is ordered by a court."

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SECTION 25. TEMPORARY PROVISION. -- On July 1, 2025:

Α. the functions, employees, money, appropriations, records, equipment and other property of the regulation and licensing department pertaining to the substitute advisory care council shall be transferred from the regulation and licensing department to the administrative office of the courts;

Β. all contractual obligations pertaining to the 8 substitute advisory care council shall be deemed to be contractual obligations of the administrative office of the courts; and

C. statutory references to the substitute advisory care council or other functions transferred from the registration and licensing department to the administrative office of the courts shall be deemed to be references to the administrative office of the courts.

SECTION 26. REPEAL.--Sections 32A-8-5 and 32A-8-6 NMSA 1978 (being Laws 1993, Chapter 77, Sections 207 and 208, as amended) are repealed.

SECTION 27. EFFECTIVE DATE. -- The effective date of the provisions of this act is July 1, 2025.

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