Alice Liu McCoy

Aging and Long-Term Services Department.





Brian Blalock

Children, Youth, & Families
Department

### New Mexico Health Cabinet Secretaries.

Working Together for New Mexicans

Dr. David Scrase, MD

Human Services Department.





Kathy Kunkel

Department of Health

Legislative Health and Human Services Committee, July 24-25, 2019



# Governor Michelle Lujan Grisham



Secretary David Scrase, M.D. Human Services Department



Secretary Kathy Kunkel Department of Health



Secretary Alice Liu McCoy Department of Aging and Long-Term Services



Secretary Brian Blalock Children, Youth and Families Department

### Office of the Governor Staff



Teresa Casados Chief Operating Officer



Jane Wishner
Executive Policy Advisor
for Health and Human
Services



Mariana Padilla Children's Cabinet Director

## **CYFD Statewide Strategic Planning**

March: Santa Fe (Central),

Gallup, Espanola

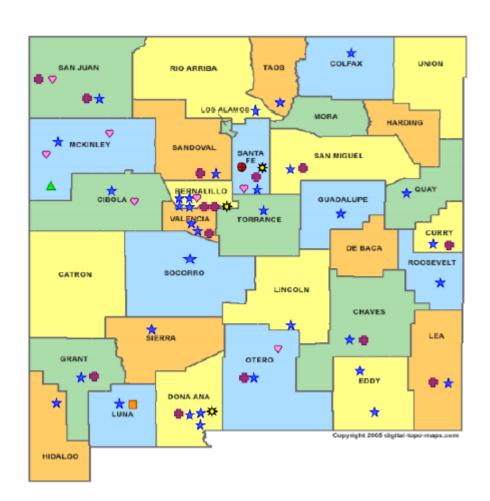
April: 23 Nations, Farmington,

Las Cruces, Los Lunes

May: Hobbs, Carlsbad, Artesia, Roswell, Deming, Albuquerque, Taos, Ruidoso

June: Las Cruces, Truth or Consequences, Albuquerque, Alamogordo

July: Raton, Las Vegas, Santa Fe (Local)



### **Strategic Plan Foundation**

## More Appropriate Placements

Reduce Congregate
Care

Increase Kinship Care

Increase Community
Based Mental Health
Services

Special Protocols for Vulnerable Populations

Prevention

Institutionalization

Homelessness

Trauma

Optimization

Data

Accountability

Funding

Staffing

Vacancy Rates

Increased training/support

Workforce Development

# **Building More Appropriate Placements**

Prevention Increase Reduce Community Based Congregate Care Supports

# More Appropriate Placements Work Streams

Congregate
Care Reform

**QRTP Licensing** 

Building out exceptions for special populations

Community
Based Supports

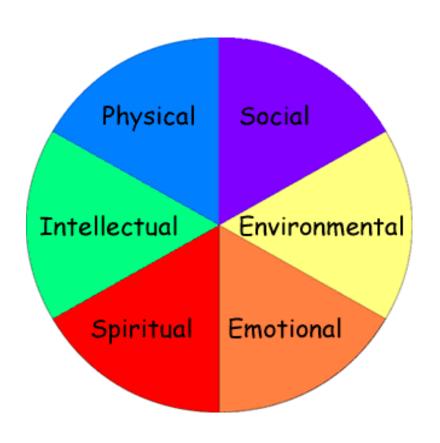
Kinship Care

Community Based Mental Health Services Prevention

Restructuring Front Door Access (SCI, Homelessness Partnerships)

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

## Why Kinship Care?



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

- Fewer prior placements
- More frequent and consistent contact with birth parents, siblings
- Felt fewer negative emotions about being placed in foster care than children placed with non-relatives
- Less likely to runaway
- In New Mexico, we only place 23% of our youth in formal care with kin.

# Kinship Care – What's Next?

**Dedicated Staffing** 

Creation of our first ever kinship care director and a dedicated ICWA unit – to help children who cannot remain with parents stay in their communities with kin.

Family Finding – More than asking

Bringing in outside support to develop real Family Finding – technology that helps us locate kin and training on engagement methodologies to help create permanent connections Funding + Behavioral Healthcare Supports

Increased funding for grandparents helping grandchildren – including closing the subsidized guardianship loophole + leveraging \$ for JJ youth – and dedicated mental health supports for youth in kin placements

Revising Licensing

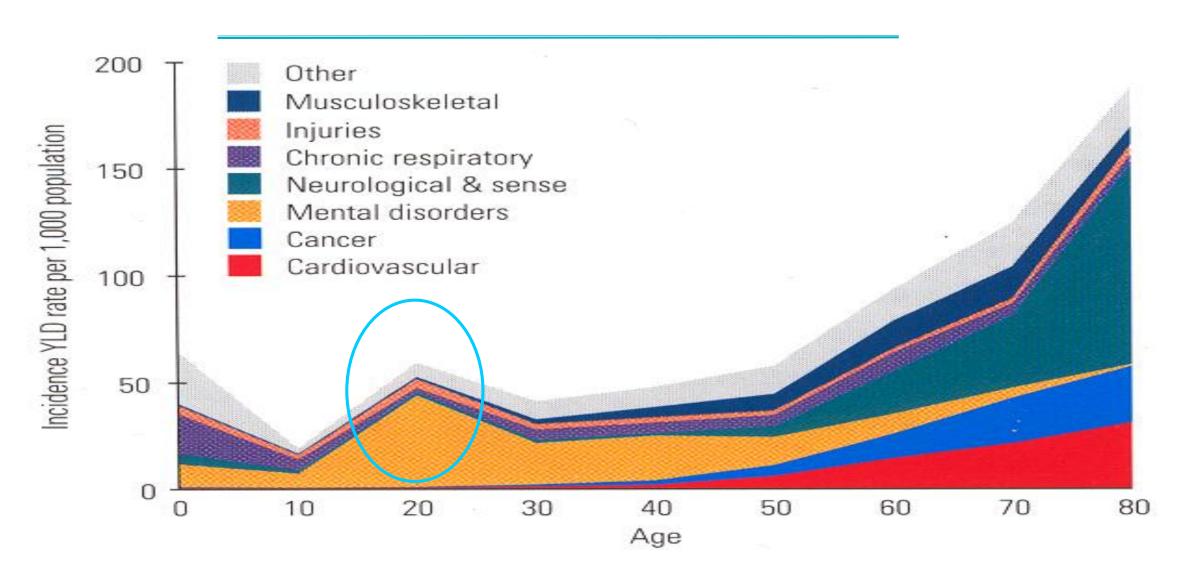
Standards

Based on Generations
United and ABA Center on
Children and the Law
survey of foster care
licensing standards to align
New Mexico with national
best practices.

# Why Community Based Mental Health Services?



# Incidence of Disease across the Lifespan

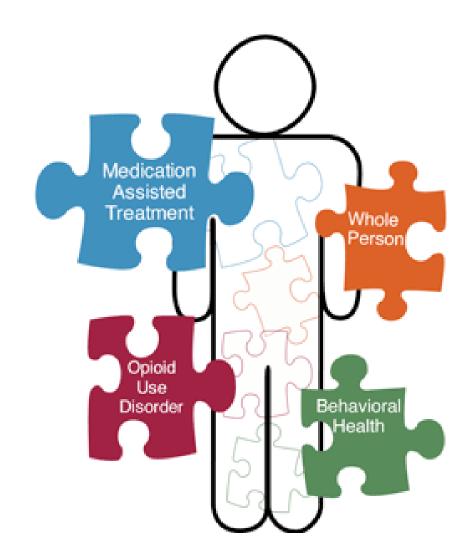


# Why Mental Health Matters to Court Involved Youth:

- According to a NIMH survey, about half of all foster youth have "clinically-significant" emotional or behavioral problems. Only 1/4th of whom received care during the one-year time period of the survey
- Out-of-home placement is associated with disruptions in attachment relationships as children's attempts to form secure attachments with a primary caregiver are interrupted
- Foster Youth often experience violence and neglect prior to placement, leading to a higher prevalence of mental health needs
- Foster youth are at an increased risk of exposure to risk factors, such as: poverty and maltreatment, putting them at greater risk for mental health issues.
- 30% of former foster care children suffer from PTSD as adults, compared with the approximately 15% of U.S. combat veterans who suffer from PTSD (American Psychological Association, 2012)

# Behavioral Health Collaborative (BHC) Goals

- Expansion of Behavioral Health Provider Network
- Expansion of Community Based Mental Health Services for Children
- Effectively Address Substance Use Disorder (SUD)
- Provide Effective Behavioral Health Services for Justice-Involved Individuals



#### **EPSDT**

EPSDT's goal is to assure that individual children get the health care they need when they need it – the right care to the right child at the right time in the right setting.

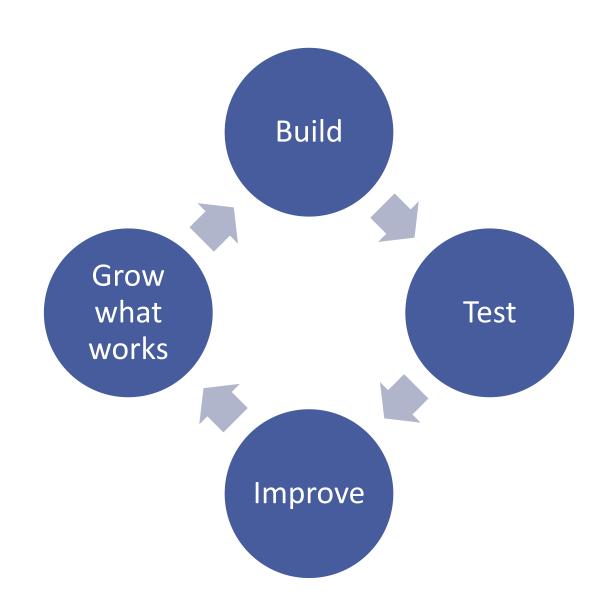
https://www.medicaid.gov/medicaid/benefits/downloads/epsdt\_coverage\_guide.pdf

### Three-Part Framework

- Menu of available array
- Clear mechanism to order/refer
- Clear mechanism for due process



# How We Get There: Help Now + Future Build



# What's Next: Behavioral Health Research & Development

# Therapeutic Behavioral Services (TBS)

- Time limited, intensive, strength-based, community-located
- Behavioral support to prevent institutionalization

# Therapeutic Case Management (TCM)

 Non-clinical intervention with an emphasis on lived experience and connection/maintaining

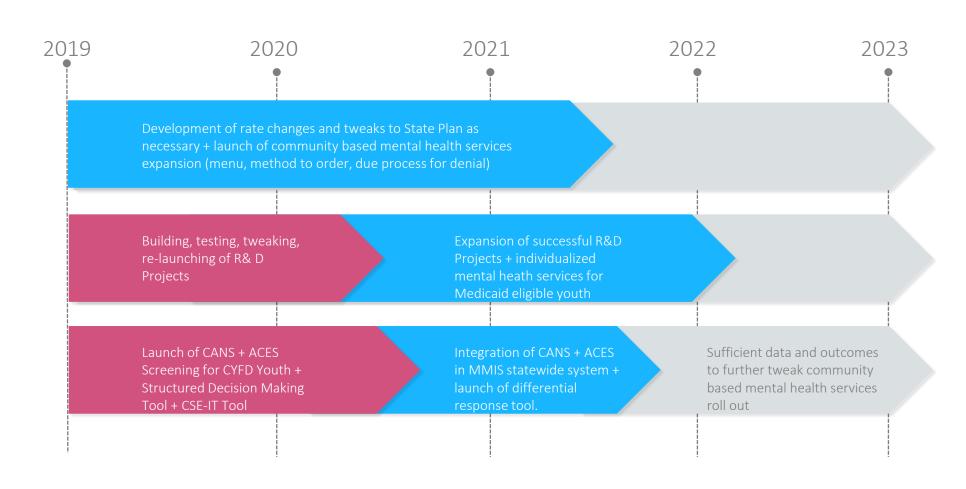
#### **EMT Corps**

• Workforce development with wraparound therapeutic supports

# High Fidelity Wraparound

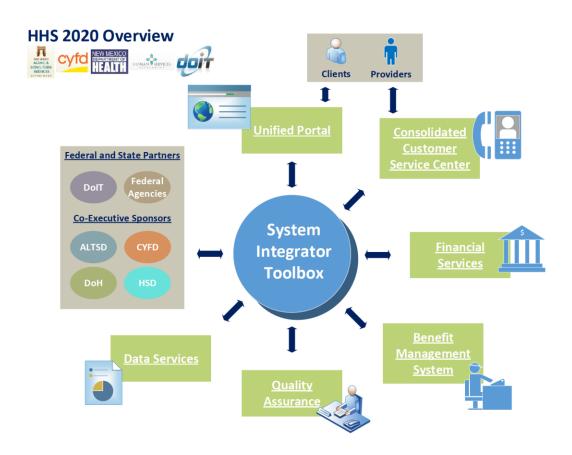
• SAMHSA funded pilot providing intensive care coordination in a strengths-based model focused on adult supports and behavioral health interventions.

# What's Next – Data Driven Decisions and Services Growth



### HHS 2020

- CYFD is an Executive Co-Sponsor of HHS 2020 and meets monthly to set direction and provide oversight for project
- CYFD's plan to build an MMIS system that is CCWIS compliant will allow for:
  - Integrated data
  - Individual client number across system
  - Increased access to entitlements and supports for children and families
  - Increased data to inform decisions
  - Publicly available dashboards for increased accountability





#### **MMIS 2020**

Agile, mobie – who is getting what when and what is the result

Data driven decision making



Federal Penalties (e.g., CAPTA + HB 230, CCWIS Compliance)

IV-E, EPSDT + Medicaid, SSI

Private Funding for R+D



Youth Centered
Child welfare community
taskforce – HJM 10
Formal Grievance Process
Increased transparency through data

#### **Optimization**

#### **STAFFING**



January 1<sup>st</sup>, 23%-25% vacancy rate in Protective Services.

As of July 1<sup>st</sup>, 11%



Gideon's Army – Creating co-horts of social workers with additional training, loan forgiveness, education leave.

Increasing number of social workers by 25% over 4 years



Dedicated efforts to increase retention including revamped trainings, job coaches, communications strategy, + new reasonable salary structure

Decreasing turnover rate each year

# Key issues that may need to be addressed in the next Legislative session

- SB 23 Extended Foster Care Clean Up
- Subsidized Kinship Guardianships
  - Closing the loophole that makes 42% of youth ineligible regardless of their needs
- Court Processes for JJ Youth in Out-of-Home Placement
  - Allowing New Mexico to leverage federal dollars for these youth
- Creation of an education advocacy department within CYFD