

Center for the Study of Social Policy
Ideas into Action

PUBLIC CATALYST



January 30, 2026

Charles Peifer
Arbitrator, *Kevin S., et al.*

Acting Cabinet Secretary Valerie Sandoval
New Mexico Children, Youth, and Families Department

Cabinet Secretary Kari Armijo
New Mexico Health Care Authority

Tara Ford
Public Counsel

Via electronic mail

Re: Co-Neutrals' Report in advance of March 2, 2026 *Kevin S.* Arbitration Hearing

Dear Mr. Peifer, Acting Secretary Sandoval, Secretary Armijo, and Ms. Ford,

As requested in Remedial Order #2 (RO#2), the Co-Neutrals are providing this report in advance of the scheduled March 2, 2026 status hearing. This report includes the most current, available data and information on the State's implementation of select RO#1 and RO#2 commitments and requirements. Prior to March 2, 2026, we plan to supplement this report with additional December 2025 performance data and information, including the number of completed well-child visits and the number of therapeutic foster care (TFC) placements during that month.

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Caseloads, Caseworker Hiring, and Retention

1. *The State will achieve the following outcome – based on FSA Target Outcomes and the State agreed to – by December 31, 2025: The State will implement the caseworker caseload standards in its Workforce Development Plan for case carrying workers and do so in accordance with the 2025 Data Validation Plan approved by the Co-Neutrals, including by implementing the graduated caseload standard and ensuring that no supervisors will be carrying any cases.* (RO#2.IV.2.a.)

The Co-Neutral team analyzed caseload data for December 15, 2025 to determine the number and percentage of workers, by type of worker, whose caseloads complied with the relevant standards as of that date. As of December 15, 2025, of all worker types, 20 percent of workers assigned as primary on any case had caseloads compliant with the relevant caseload standards. By worker type, caseload compliance was as follows: nine percent of investigation workers, 15 percent of permanency workers, 24 percent of licensing and support workers, and 57 percent of in-home services workers.[1]

More specific details are included in Attachment A to this report.

2. *The State is directed to make any changes to the data dashboard it displayed at the July 3, 2025 hearing needed to obtain approval of the dashboard by the Co-Neutrals before September 30, 2025. I request that the Co- Neutrals report on the status of their approval of the dashboard at the October 7, 2025 status conference.* (RO#2.IV.4.b.)

The Co-Neutral team's review of the State's caseload data dashboard is ongoing. The Co-Neutral team has been working with the State for several months to build a shared understanding of the State's caseloads data and the Final Settlement Agreement (FSA) Data Validation Plan (DVP) methodology for assessing compliance with the State's caseloads standards. The State has made significant improvements to its approach to producing and analyzing its data. Now that the Co-Neutral team has access to the dashboard and the processed data that feeds into it, we are reviewing them for accuracy and consistency. We plan to review the dashboard and the source data for three points in time – caseloads as of January 26, February 9, and March 2, 2026 – and will provide our assessment and findings to the Arbitrator and parties.

3. *The State will implement a structured pay differential for all 35 Emergency Response positions in addition to the existing after-hours employees.* (RO#2, III.1.)

CYFD created the Emergency Response Investigation positions to provide staffing capacity to respond to after-hours emergencies, on-call response, and crisis situations with a goal of

[1] Workers assigned as primary to multiple case types are counted in the Co-Neutral team's compliance analysis under each case type represented in their caseload. In other words, the compliance summary for permanency, for example, shows compliance not just for workers with the job title of "Permanency Coordinator" but for all workers assigned as primary to at least one permanency case, regardless of job title.

eliminating the need for other case workers to be on-call or work beyond their assigned shifts. In total, CYFD has 35 Emergency Response Investigation positions across seven counties (27 investigators and eight supervisors).[2] Additionally, CYFD created the Care and Behavioral Support Specialist and supervisor positions (CBSS; formerly titled Emergency Response Behavioral Health Staff) to provide care and supervision to children placed in CYFD county offices or who are experiencing placement disruptions and require support. CYFD has created a total of 25 CBSS positions between Dona Ana (12) and Bernalillo (13) counties (totals include two CBSS supervisors in each office).

CYFD has not yet been successful in hiring and filling all Emergency Response positions. As of October 31, 2025, the State reported that 12 of the 35 Emergency Response Investigation positions were filled, including two supervisors. As of December 31, 2025, 22 positions were filled, including four supervisors.[3]

For CBSS staff, as of October 31, 2025, half of the 12 positions in Dona Ana (6) were filled, and two of the 13 Bernalillo positions were filled; none of these filled positions included a CBSS supervisor. As of December 31, 2025, Dona Ana County continued to have half of their CBSS positions filled; five potential candidates were identified by the State as within the hiring process. In Bernalillo County, five of the 13 CBSS positions were filled as of December 31, 2025, including one supervisor.

In job descriptions provided by the State to the Co-Neutrals for Emergency Response positions, the descriptions state that a pay differential will be paid to all overnight Emergency Response Investigations staff and all overnight CBSS positions.[4]

In December 2025, the Co-Neutral team conducted interviews with eight Emergency Response staff in four counties. Six of the staff confirmed that they are receiving a set pay differential, and the other two staff were unsure whether they were or not.

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[2] The seven counties are Bernalillo, Valencia, Chaves, Sandoval, Dona Ana, San Juan, and Santa Fe.
[3] Filled Emergency Response Investigation positions by county as of December 31, 2025 are as follows: two of eight positions in Bernalillo were filled; three of four positions in Valencia were filled; two of four positions in Chaves were filled; four of five positions in Sandoval were filled; five of six positions in Dona Ana were filled; all four positions in San Juan were filled; and two of four positions in Santa Fe were filled.
[4] The amount of the differential is unclear. The initial Emergency Response plan provided by the State in April and September 2025 states the Emergency Response Investigators and CBSS staff working overnight shifts will receive a 15% pay differential. However, the most recent job descriptions provided by the State to the Co-Neutrals state that Emergency Response Investigators working overnight will receive a 10% pay differential, while CBSS staff working overnight will receive a 5% pay differential. Additionally, in a September 2025 letter to the Co-Neutrals, the State identified that Emergency Response Investigators working the Swing shift (working from 2:00pm – 11:00pm) will receive a 5% differential above the base salary, while those working the overnight shift will receive a 10% differential above the base salary.

4. *CYFD has the capacity to deliver NET every two weeks, sustainably, but they have opted to keep training at five-week intervals.* (RO#2, III.3.)

The Co-Neutral team conducted interviews with eight Emergency Response staff in four counties in December 2025. Among the six staff who were newly hired by CYFD for their current roles, none reported significant delays in starting NET. All staff reported beginning the online coursework within a few days of their start date, if not the first or second day. Among the five staff who were newly hired *and* who had fully completed NET at the time of the interview, the average time from hire date to NET completion was 55 days, with a range from 42 to 63 days. Additionally, the Co-Neutrals spoke in person with more than 50 CYFD staff, including case workers, supervisors, and managers, in Bernalillo and Santa Fe counties in mid-January 2026. Supervisors and managers with knowledge on this topic shared that most new employees were able to access NET quickly after their start date, and new staff – not only those in Emergency Response positions – confirmed they were able to begin NET relatively soon after their start date.[5]

Although many CYFD staff reportedly commence NET quickly after hiring, most staff reported that NET did not adequately prepare them to do their jobs, and expressed a desire to have more role-specific training sooner than when they begin on the job training.

5. *The State's emergency response investigation workers will only respond to emergency reports and not keep the case assignment beyond the initial response. The Secondary shift will only respond to emergency reports and not keep the case assignment beyond the initial response. CYFD is in alignment with the Co-Neutrals' recommendations and best practice in other states. CYFD Plans to have all reports responded to by the Secondary Shift transferred to the day shift of the following morning.* (RO#2, III.8.)

Correspondence provided by the State to the Co-Neutrals in April and September 2025 state that swing shift Emergency Response Investigators (working from 2:00pm – 11:00pm) will respond to both Emergency and Priority 1 reports and maintain the case from initiation to closure.[6] In a letter to the Co-Neutrals in September 2025, CYFD clarified that Emergency Response Investigators working the overnight shift (from 11:00pm – 8:00am) and weekend shifts will not carry the investigation cases that they

[5] The Co-Neutrals did not collect information related to specific number of days from hire to NET start date during the interviews in January 2026.
[6] New Mexico's Administrative Code, Section 8.10.2.13 defines an Emergency report (E) as a report alleging a danger indicator involving a vulnerable child, including, but not limited to, an abandoned infant; any physical injury to an infant; a potentially life-threatening situation; recent sexual abuse; a law enforcement request for immediate response; and recent serious trauma, such as a head injury, burns, or broken bones. An Emergency requires that an investigation be initiated within three hours. A Priority 1 report (P1) is a report alleging physical injury involving a vulnerable child who is in a safe environment at the time of the report, or a report alleging a danger indicator involving a vulnerable child, but where the alleged perpetrator will not have access to the child for the next 24 hours. A P1 report requires that an investigation be initiated within 24 hours.

initiate, as those cases will be transferred to daytime shift investigators the next day.

The Co-Neutrals completed interviews with five Emergency Response Investigators in December 2025. Among the five staff, only one had started working the shift for which they were hired. The other four were working the 8:00 a.m. to 5:00 p.m. day shift and either carrying ongoing investigations or supporting other investigators. The one staff who had started working the 11:00 p.m. to 8:00 a.m. shift described passing off investigations to the day shift staff once their shift ended. The same staff explained that they were still carrying cases from a period when they were working routine investigation cases during the day (from late September to mid-November 2025). The other four staff reported that management informed them that they would continue working the day shift in light of extensive investigative staff vacancies and not begin to assume the overnight shifts until adequate staff and/or supervisors had been hired and trained.

6. *The State's emergency response behavioral health specialists need to be provided with support from clinical professionals/teams when managing crisis situations in the office stay settings.* (RO#2, III.9.)
7. *The State agrees that it needs to develop a system of support for emergency response behavioral health specialists in times of crisis and escalated behaviors, including offering local providers the ability to co-locate.* (RO#2, III.10.)
8. *As to Items 9 and 10 in Section III, the State will submit a plan for compliance, and obtain approval of the plan from the Co-Neutrals by October 7, 2025.* (RO#2, IV.3.)
9. *The State will not train emergency response behavioral health specialists in any hands-on de-escalation restraints.* (RO#2, III.11.)

The State submitted a revised plan for Emergency Response Behavioral Health Staff, now renamed Care and Behavioral Support Specialists (CBSS), on November 14, 2025. As recommended by the Co-Neutrals in prior feedback, CYFD transitioned CBSS staff to the CYFD's Children's Behavioral Health Services (CBHS) unit instead of the Protective Services Division (PSD), so CBSS staff can receive direct clinical supervision and support from CBHS leadership.

The plan includes the CBSS De-Escalation Process for Youth in CYFD Offices, which identifies that CBSS staff should contact the CBSS supervisor and the on-call Community Behavioral Health Clinician (CBHC) during times of crisis. The CBHC is intended to provide real-time coaching and/or coordinate crisis stabilization or transport if required. The Co-Neutrals provided approval of the State's plan on January 23, 2026. The approved plan documents are provided in Attachment B, Ba, and Bb.

Separate from the plan, in a letter to the Co-Neutrals on September 10, 2025, the State identified a partnership with Family and Youth Innovations Plus to provide clinical professional support in Dona Ana County with the ability to co-locate at a site separate from the office that had been identified by CYFD.

In the CBSS job descriptions provided by the State, CYFD identifies that CBSS staff will be trained in Crisis Prevention and Intervention (CPI) which is a non-violent crisis intervention

approach, and stated that CBSS workers will not be trained in hands-on de-escalation restraints.

The Co-Neutral team completed interviews with three CBSS staff in two counties in December 2025, and spoke with available CBSS staff during a site visit to Bernalillo County in January 2026. CBSS staff who were newly hired between August to October 2025 described daily responsibilities that align with their job descriptions, including maintaining line of sight supervision of children, assisting with meals (as prepared in the Receiving Center for children in Bernalillo County), administering medication, and engaging directly with children during their shifts. Regarding outside support in times of crisis, multiple CBSS staff from both Bernalillo and Dona Ana counties reported they had not been able to access clinical supports while managing crises in the office, such as mobile crisis supports. One CBSS staff shared they were able to contact an on-call CBHC staff during a crisis, who was only able to provide assistance over the phone. Staff reported they often call 911 to de-escalate youth when experiencing a crisis in the office; in Dona Ana County, staff can request the Project LIGHT team through 911 when dealing with mental health concerns.[7] All CBSS staff stated that CPI training explicitly instructed staff not to use hands-on de-escalation techniques.

Additionally, the State has provided 113 critical incident reports (CIRs) to the Co-Neutrals for incidents occurring in the Bernalillo and Dona Ana county offices between August 18 and December 31, 2025, with 53 CIRs occurring in the Dona Ana County office and 60 occurring in any of the identified Bernalillo County offices.[8] These critical incidents, described in detail later in this report and in Attachment D, supported by the Co-Neutral's in-person interviews with CYFD staff in Bernalillo County, have led the Co-Neutrals to conclude that even with CBSS staffing, the State is unable to sufficiently remedy the many significant risks to child safety in the CYFD offices and that the practice of housing children in offices poses an immediate danger to children, youth, and staff. [9]

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[7] Project LIGHT (Lessening the Incidence of Grief, Harm, and Trauma) is a response unit within the Las Cruces Fire Department that can be dispatched through 911. Additional information can be found here.

[8] The identified Bernalillo County offices include: CYFD Office – Bernalillo, CYFD Office – Pine Tree, and the Receiving Center.

[9] On January 19, 2026, Governor Lujan Grisham signed Executive Order 2026-003 banning the practice of children in state custody sleeping overnight in government offices effective March 1, 2026. Following that order, the Co-Neutrals requested a copy of the State's plan to move children out of offices and into appropriate settings. The State provided information to the Co-Neutrals on January 28, 2026 stating that most children and youth who had been placed in offices within the prior month had been moved into alternative placements, including but not limited to resource homes, congregate care/group home facilities, and a newly opened transitional facility in Las Cruces that is being managed and staffed by CYFD behavioral health specialist positions. CYFD leadership acknowledged that the transitional facility is not intended for children's long-term placement. The agency describes the facility as a better placement option for youth than government offices, and represented that its opening allows for the immediate end of office placements in the southern part of the State.

Resource Family Recruitment and Retention

1. *The State will approve and license 265 new non-relative resource homes between January 1, 2025 and December 31, 2025.* (RO#2.IV.2.b.)

CYFD reports the agency newly licensed 122 new non-relative resource homes between January and December 2025, 46 percent of the annual target.[10]

Table 1: Non-Relative Resource Homes Newly Licensed as Reported by CYFD

January – December 2025

County	New Homes Jan - Aug 2025	New Homes Sept 2025	New Homes Oct 2025	New Homes Nov 2025	New Homes Dec 2025	Total
Bernalillo	24	2	9	5	6	46
Chaves/Eddy	5		1	1	4	11
Dona Ana	3		2		2	7
Santa Fe	4				1	5
San Juan	4	2				6
Sandoval	4		1		3	8
Otero	3	2	1		1	7
Lea	2		3			5
Curry	2	1			2	5
Valencia	2			1	1	4
San Miguel	3					3
Los Alamos			1	1	1	3
Grant	2					2
Quay	2					2
Torrance	2					2
Cibola	1			1		2
Lincoln	1					1
Rio Arriba					1	1
Roosevelt	1					1
Taos					1	1
Total	65	7	18	9	23	122

Source: Data from CYFD's Monthly Navigation Spreadsheet

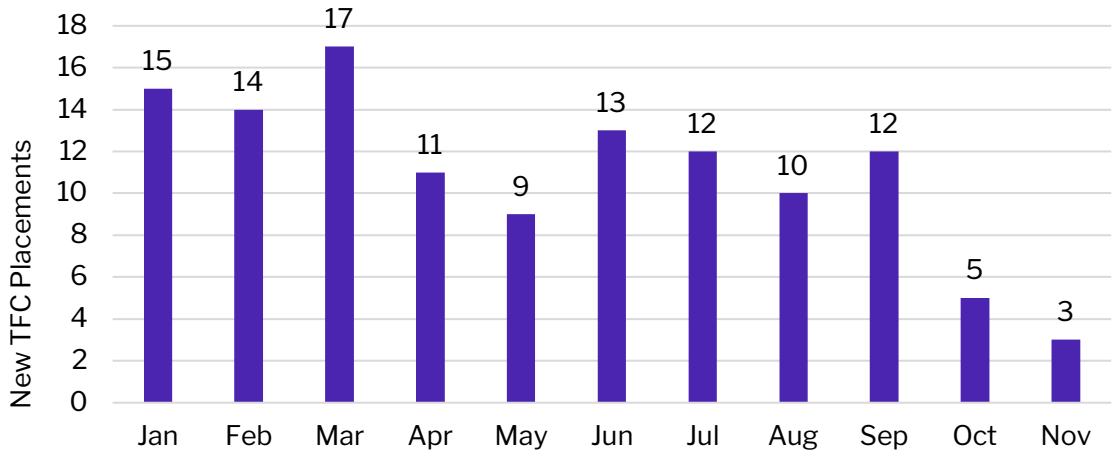
[10] This analysis of licensed homes is based on data provided in CYFD's December 2025 Navigation Tracking Spreadsheet ("navigation spreadsheet") that was sent to the Co-Neutrals on January 6, 2026 as well as updated data provided on January 28, 2026. For the Co-Neutrals' 2025 Annual Report, the data and methodology set forth in the FSA DVP will be utilized. CYFD provided this preliminary data, in part, to meet the Arbitrator's request for real-time assessments of performance pursuant to RO#2. The Co-Neutrals team reviewed the licensing records in FACTS for these 122 resource homes and verified their 2025 new home status and applicability toward the annual target.

2. *The State will approve and license 244 new treatment foster care placements between January 1, 2025 and December 31, 2025.* (RO#2.IV.2.c.)[11]

Between January and November 2025, the State made 121 new TFC placements, 50 percent of the annual target (see Figure 1 below for placements by month).[12,13] The Co-Neutrals are analyzing the December 2025 TFC placement data, and will include it in a supplemental report to the Arbitrator and parties prior to the March 2, 2026 hearing.

Figure 1: New TFC Placements as Reported by CYFD

January – November 2025



Source: Data from CYFD's Monthly Placement Spreadsheet

3. *CYFD will dedicate one placement staff worker located in each of the five high-needs counties identified in the CAP (Bernalillo, Dona Ana, Santa Fe, San Juan, and Chavez/Eddy) to focus exclusively on foster placements…The individuals designated will maintain their exclusive focus on recruitment in the five high-needs counties for not less than six months from February 17, 2025 so that the Co-Neutrals can assess whether this strategy – agreed to in the CAP – is proving effective.* (RO#1, Paragraph 5)

As referenced in the Co-Neutrals' September 2025 Report, the Co-Neutral team has been interviewing recruitment placement staff within the five high-needs counties (HNC) since the spring of 2025. Overall, informed by the nine months of interviews conducted with

[11] The FSA requirement for which the annual target of 244 was established is for the number of new TFC placements made during a year, not new TFC homes approved and licensed.
[12] This analysis of TFC placements is based on placement data provided monthly by CYFD to the Co-Neutrals. These "real time" data have not undergone the State's full quality assurance processes, thus, may differ from the State's annual data submission which is provided on May 1st of each year. For the Co-Neutrals' 2025 Annual Report, the data and quality assurance processes set forth in the FSA DVP and/or as agreed upon with the State will be utilized. The analysis in this report is being provided to meet the Arbitrator's request for real-time assessments of performance pursuant to RO#2.
[13] The DVP defines a new TFC placement as the placement of a child who is eligible for treatment foster care, or their accompanying sibling, to a licensed treatment foster home that they have not resided in within the previous 365 calendar days.

CYFD recruiter staff, and in review of the data on the number of inquiries for new community homes, as well as data on the number of newly licensed community homes, the Co-Neutrals are unable to conclude that this strategy, as implemented, has been or appears likely soon to be effective. The initiative was slow to establish itself (as full-time recruiters were not in place in all HNCs until July 2025), and the recruiters recounted frequent shifts in focus between recruitment, navigation, and retention activities, with no clearly articulated set of strategies. Staff also reported fewer and fewer recruitment events, a byproduct of multiple factors, including a more stringent event approval process. Further, with the exception of Bernalillo County community home licensures, the 2025 inquiry and community home licensure data fail to demonstrate notable improvement throughout the year. Attached is a summary report of findings from interviews conducted between October 2025 and January 2026 (Attachment C).

Well-Child Checks

1. *The State will ensure that 100% of children will receive a comprehensive well-child visit within 30 days of entering state custody.* (RO#2, IV.2.d.)
2. *HCA will begin submitting to the Co-Neutrals and to the arbitrator the quarterly reports the PHP provides regarding the number of well-child checks completed within 30 days after a child enters CYFD custody. CYFD is directed to ask PHP to ensure that these reports include details why any required well-child check was not completed within 30 days, with the reason why.* (RO#1, Paragraph 7)
3. *The State will provide the Co-Neutrals with aggregate quarterly data reports and case- identifying information for the children for whom the State identifies have missed well-child visit due to one of the articulated criteria for a well-child visit not occurring*. (RO#2, III.6.)

The State provided the Co-Neutrals with a quarterly well-child visit performance report for January through March (Q1) 2025 on May 30, 2025, and a quarterly performance report for April through June (Q2) 2025 on August 29, 2025. In the Q1 report, the State was unable to identify the specific reasons for the missed and late well-child visits due to data limitations.[14] In the Q2 report, the State identified reasons as articulated in RO#1 for three children who missed their well-child visits, however, child-specific information that would allow the Co-Neutrals to independently assess these reasons was not provided.[15] Additionally, the Q1 and Q2 reports utilized a methodology inconsistent with the *Kevin S.*

[14] RO#1 required the State to categorize reasons for missed or late visits into one of eight categories as follows: (1) lack of provider willing or able to see the child within 30 days; (2) no shows for scheduled appointments; (3) lack of transportation; (4) lack of provider within reasonable distance of child's placement; (5) refusal by child 14 years and over to see provider for a well-child check; (6) child no longer in state custody; (7) inability to contact caseworker or foster parent; and (8) "Other". In the case of "Other" reason, the report should provide a narrative.

[15] Reasons identified by the State in the Q2 report were: "1 Could not reach PPW; and 2 Runaway." A fourth child was identified as having a missed well-child visit, however, a reason for the missed visit was not identified.

FSA and DVP to measure the 30-day timeframe from the date a child enters care to when the well-child visit is required to be completed.

Following the issuance of RO#2, the Co-Neutrals requested monthly child-specific data for all children who entered custody during the month and had a completed well-child visit, and reiterated the request for case-identifying information for children who had missed, or received late, well-child visits. To meet this request, and to ensure the correct entry into custody dates were being used to measure timeliness in subsequent data, the State collaborated with the Co-Neutral team to refine their approach to well-child visit data collection and reporting to ensure it contained all required elements, resulting in the State producing one monthly report which contained case-identifying information for all children who entered custody during a specific month in 2025, information on the status of their well-child visit, and reasons for missed or late well-child visits in Q3 and Q4, as applicable.

To assess the State's performance in securing timely well-child visits for children who entered custody, the Co-Neutral team utilized entry cohort data and well-child visit completion data provided by the State. The Co-Neutral team used this data to determine the number of children who entered custody during 2025 and who remained in custody longer than 30 days ("episodes of custody"). The Co-Neutral team then calculated the days between the start of the episode (entry into custody) and the well-child visit completion date and sorted into categories of within 30 days, 31 to 45 days, 46 to 60 days, 61 to 90 days, and 91 or more days.[16]

Overall, the State's data showed there were 752 episodes of custody for children who entered custody between January 1 and November 30, 2025 that lasted longer than 30 days. There were therefore 752 required well-child visits from January through November 2025. Of these required well-child visits, 393 (52%) were completed within 30 days, 259 (34%) were completed late, and 100 (13%) were not completed at all.

[16] Although the Co-Neutral team generally utilized an analysis similar to the methodology used to calculate the State's performance for the Co-Neutrals' Annual Reports, the data for this report has not been fully validated by the Co-Neutrals as required by the DVP. Therefore, analyses provided in this report may differ from those provided in the Co-Neutrals' 2025 Annual Report that will be issued later this year.

Table 2: Required and Completed Well-Child Visits in 2025[17]

Entry month	Required well-child visits	Completed well-child visits						Not completed
		Within 30 days	31-45 days	46-60 days	61-90 days	91+ days	Total	
January	61	9	7	5	10	18	49	12
February	76	9	8	12	10	20	59	17
March	72	24	11	10	6	11	62	10
April	54	16	5	6	10	9	46	8
May	38	7	2	3	10	7	29	9
June	46	15	5	10	8	2	40	6
July	69	43	7	7	0	3	60	9
August	105	80	11	0	6	1	98	7
September	87	68	3	1	3	0	75	12
October	83	68	9	0	1	0	78	5
November	61	54	2	0	0	0	56	5
Total	752	393	70	54	64	71	652	100

Source: Entry cohort data and well-child visit data produced by the State

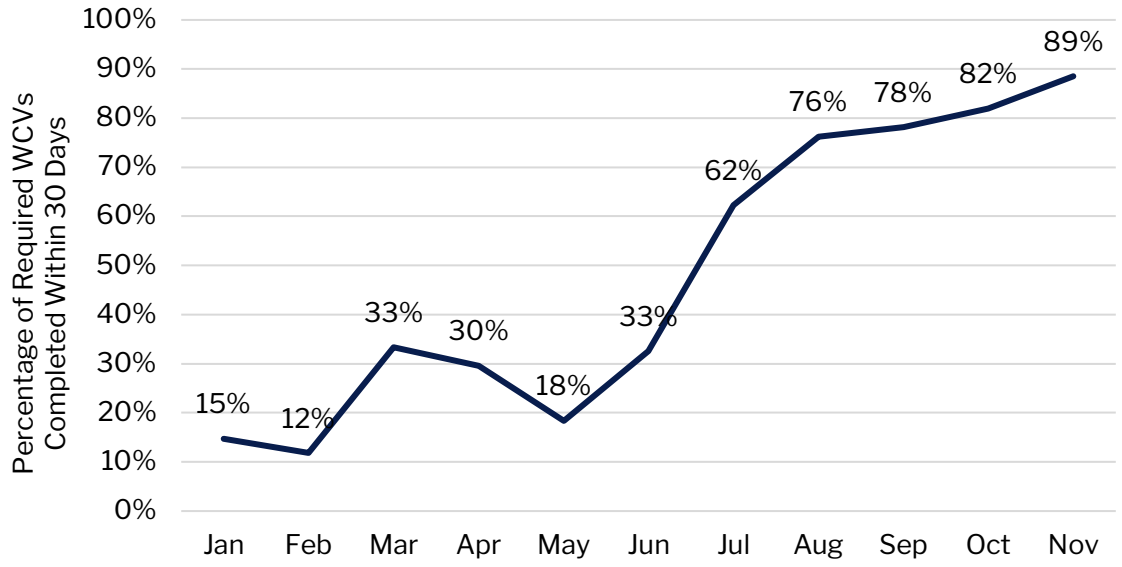
The data show that the State made substantial progress in the second half of the year, with 77 percent of children receiving well-child visits within 30 days of entry from July through November 2025, compared to 23 percent in the first half of the year. For the month of November 2025, performance rose to 89 percent.[18]

[17] Per the DVP, well-child visits should only count if they were part of an episode of custody that lasted longer than 30 days. There were 30 entries into custody that appeared in the State's well-child visit data but did not match any entry in the State's cohort data that lasted longer than 30 days. Some of the entries that appeared in the well-child visit data were episodes of custody that did not last longer than 30 days and were excluded from the Co-Neutrals' analysis. Additionally, there were some mismatches between the entry date in the State's entry cohort data and the entry date in the State's well-child visit data that the Co-Neutrals nonetheless included in the calculations due to very similar entry dates. The Co-Neutral team also identified five children who appeared in the well-child visit data but were not in the entry cohort data and were excluded from the analysis.

[18] As described above, there were data discrepancies identified between the well-child visit data and entry cohort data produced by the State. Specifically, one child had an entry date listed in the cohort file as being five days earlier than the date listed in the well-child visit data. Using the child's entry date from the cohort data resulted in the child's well-child visit occurring after 30 days.

Figure 2: Percentage of Required Well-Child Visits (WCVs) Completed Within 30 Days in 2025

By month of entry date
N = 752 required WCVs, 393 completed within 30 days

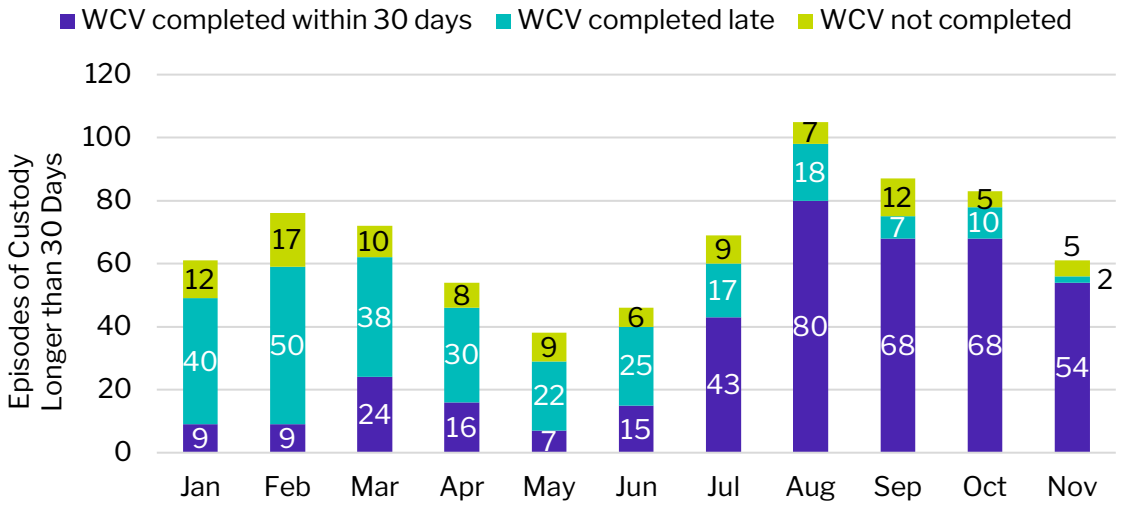


Source: Entry cohort data and well-child visit data produced by the State

Figure 3 shows how many of the required well-child visits completed after 30 days were either completed late or not completed at all. The figure shows that the State made notable progress toward timely completions of children's well-child visits in the second half of 2025.

Figure 3: WCVs Completed for Children in Custody Longer than 30 Days

By month of entry date and well-child visit completion status
N = 752 required WCVs, 393 completed within 30 days



Source: Entry cohort data and well-child visit data produced by the State

To validate reasons for missed and late well-child visits, the Co-Neutrals utilized data submitted by the State for well-child visits that were completed late or missed for children who entered state custody between July through October 2025.[19] The State also provided relevant MCO care coordination notes as requested by the Co-Neutrals. The Co-Neutral team utilized the care coordination notes and information from children's FACTS case records to verify reported reasons and identify any additional reasons for missed and late well-child visits for a sample of children who entered custody between July through September 2025 who did not receive a well-child visit (24 records reviewed), and for all children who entered custody in October 2025 and experienced a late or missed well-child visits (10 records reviewed).[20]

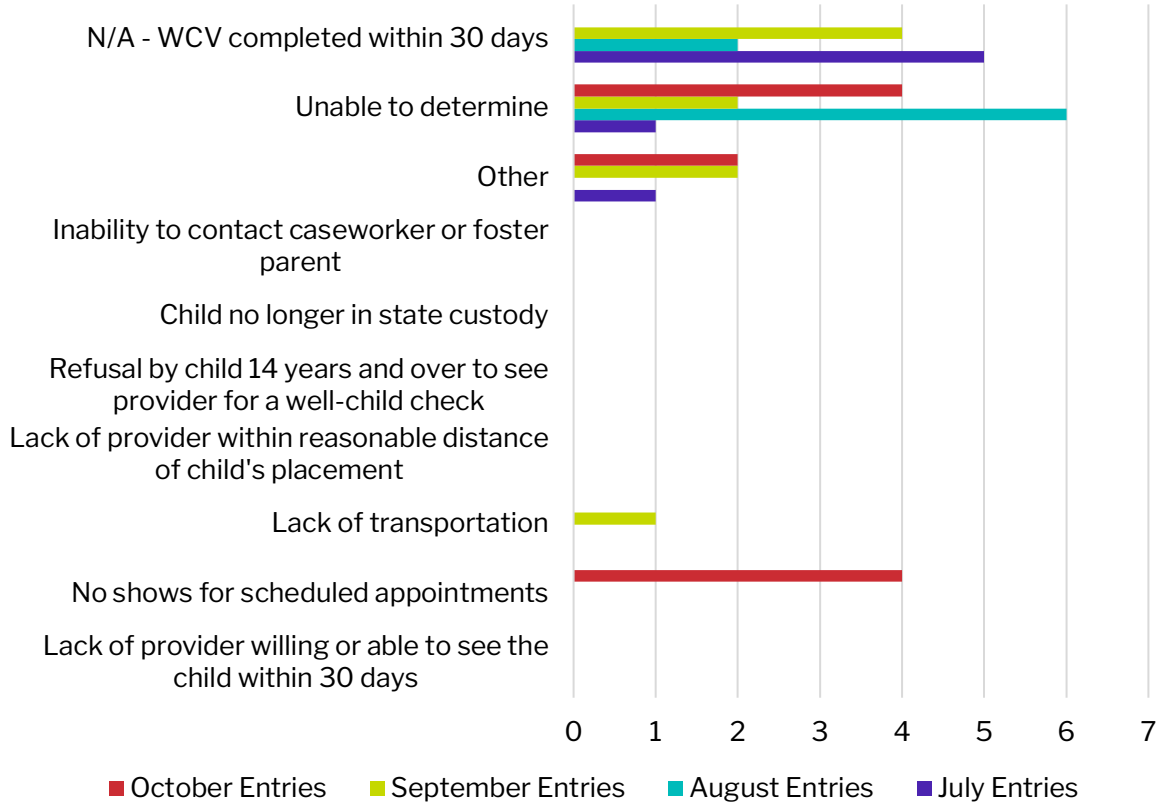
The Co-Neutral team found documentation of a completed well-child visit for 14 of 24 children who entered custody between July through September 2025 initially identified in the State's data as not receiving a well-child visit. Of those 14 completed well-child visits, 11 were completed within 30 days, and three were completed after 31 or more days of entering custody. Of the 10 cases reviewed for children who experienced late or missed well-child visits who entered custody in October 2025, the Co-Neutral team's findings confirmed the State's data. The reasons identified by the State and in the Co-Neutral team's review are identified in Figure 4.

[19] The State identified reasons for missed well-child visits only for children who entered custody between July through September 2025, and provided reasons for missed and late well-child visits for children who entered in October 2025.

[20] A limitation of this review is that the State's reported method for verifying a well-child visit was changed substantially beginning with October 2025 entries. The State had previously relied only on provider reports and Medicaid billing data to record completed well-child visits, however for the October 2025 data and all subsequent reports, the State's verification process includes reviewing the children's FACTS case record to determine whether a well-child visit was completed. Because of these changes, the results for the case record review completed by the Co-Neutral team for July through September 2025 entries differs from data provided by the State regarding well-child visit completion.

Figure 4: Identified Reasons for Missed and Late Well-Child Visits[21]

July – October 2025
N=34 case records reviewed



Source: WCV data provided by the State and CYFD FACTS case records

The Co-Neutral team's review demonstrates the impact of a lack of coordination or communication between CYFD and HCA prior to changes the State made in October 2025, as more than half of the sample reviewed for entries from July through September 2025 marked as missing a well-child visit had documentation of a visit within the children's FACTS case records. The State's shift to monitor the completion of well-child visits in a more coordinated way between the agencies also appears to have impacted the rate of well-child visit completion overall, with over 80 percent of children who entered custody in October and November 2025 receiving well-child visits within 30 days of entry.

[21] Specific reasons provided in the "other" category were for children who were hospitalized after entering custody which the State reported inhibited their ability to complete a well-child visit.

4. *The State will continue to explore the creation of a centralized Medicaid data exchange that would allow all MCOs to report well-child check compliance consistently.* (RO#2, III.14.)

The State notified the Co-Neutrals in correspondence on December 23, 2025 that it does not currently plan to pursue the creation of a centralized Medicaid data exchange.

5. *The State plans by the end of calendar year 2025, to expand its co-location program to additional counties including Santa Fe, Roosevelt, Curry, Los Alamos, Rio Arriba, Quay, Harding, and De Baca*. (RO#2, III.12.)

As requested during the status hearing held on December 1, 2025, the State provided the Co-Neutrals on December 23, 2025 with information regarding the co-location of PHP care coordinators into CYFD offices. As of December 31, 2025, co-location for a limited number of hours bi-weekly was occurring in 13 CYFD county offices. Bernalillo (including the ICWA unit), Chaves, Dona Ana, Lea, Otero, and San Miguel counties all received between two to four hours per week, while Cibola, McKinley, Rio Arriba, San Juan, Sandoval, Torrence, and Valencia counties all received two to three hours every other week. The information provided by the State describes the value of co-location as variable by county. Some positive outcomes described by the State include relationship building between CYFD staff and care coordinators, and the ability for care coordinators to obtain necessary signatures from staff. Surveys conducted by PHP with CYFD case workers document that other regular contacts (virtually, via phone call or text) are also occurring and that staff can utilize existing meetings to collect signatures as needed.

Co-location was initially raised as a strategy by the State to improve the timely completion of well-child visits as an alternative to the Co-Neutrals' suggestion of co-locating nurses or community health workers in CYFD offices. Information shared by the State asserts that co-location has not been a large factor in the improvements made in timely completion of well-child visits.

Data Submissions

1. *The State will continue to provide the Co-Neutrals with quarterly TFC data and child entry cohort data.* (RO#2, III.16.)

The State has provided the Co-Neutrals with the above referenced data, in addition to other data requested by the Co-Neutrals as needed to assess the State's performance toward RO#1 and RO#2 commitments and outcomes.

Critical Incidents

1. *The State will provide the Co-Neutrals with written notice by email within one business day of notification to the Department of any child fatality or critical incident regarding a child placed in hotels, motels, offices, out-of-state, in shelters, or in congregate care in NM. Along with notice of the critical incident, the State will provide a safety plan for the child, describing services and supports that will be provided as necessary to address the harm of the critical incident and steps that will be taken to protect the child from such harm in the immediate future. Children placed in offices for under 23 hours will be included in the critical incident reviews. The Co- Neutral team will promptly be provided with any documents they request related to the placement, including emails related to staffing and oversight of placement decisions. The State shall respond in writing within two business days to the Co- Neutrals' request for information corresponding to an identified critical incident.* (RO#2, IV.4.a.)

On August 22, 2025, the State began providing the Co-Neutrals with Critical Incident Reports (CIRs) for critical incidents that occurred beginning August 18, 2025. The State initially provided documents consistent with the 2023 Corrective Action Plan (CAP) definition of critical incidents.[22] In compliance with RO#2, on September 15, 2025, the parties agreed to an updated definition of critical incidents. The agreed-upon definition specifies the following as critical incidents:

- Any fatality;
- Any near fatality to mean when a child in state custody experiences a serious or critical condition while in state custody. Examples of serious or critical conditions include critical internal injury, threatened organ failure, severe shock, substantial risk of death as determined by a medical assessment and other conditions that require life-saving interventions or admission to intensive care;
- Any serious injury means injury that requires medical attention or hospitalization;
- Any suicide attempt;
- Any allegation of restraint/seclusion;
- Any change in licensure within any facility in which a child in state custody is placed; and
- Any 911 call for a child placed in hotels, motels, offices, out-of-state or in congregate care. Congregate care includes a wide array of out-of-home settings including, but not limited to, residential treatment centers, shelters, group homes, crisis shelters, multi service homes, room and board facilities, other residential shelter care facilities for children, and group short-term living accommodations.

Recognizing that abuse and neglect of children in state custody are also critical incidents, the parties and the Co-Neutrals agreed that any allegation of abuse or neglect for children in state custody will be reported to the Co-Neutrals on a monthly basis in the format as requested by the Co-Neutrals.

[22] The 2023 CAP definition can be found here. The CAP and 2025 RO#2 definitions are overall similar; however, the CAP definition is focused on children within specific placement settings (e.g., office, hotel, motel, out-of-state, in shelters, or in congregate settings in New Mexico) while the RO#2 definition applies to a broader range of critical incident types and placement settings.

The State provided the Co-Neutrals with notice of 201 critical incidents pertaining to 65 unique children that occurred between August 18 and December 31, 2025.[23] Additionally, the Co-Neutrals identified 183 critical incidents that occurred between October and December 2025 via separate reporting that CYFD and HCA provided to the Co-Neutrals through weekly or bi-weekly reports on the status of children placed out-of-state, and the Co-Neutral team's review of these children's FACTS case records. Of these, 182 critical incidents were identified as allegations of restraint and/or seclusion, while one was for an allegation of abuse or neglect. Of the 183 critical incidents found by the Co-Neutrals, 20 corresponding CIRs were provided by the State (11%), resulting in an overall total of 364 critical incidents involving children in state custody.[24,25]

CIRs Provided by the State

The majority of critical incidents reported by the State were for calls to 911 (123 or 61%), while 21 percent (43 CIRs) were for allegations of restraint or seclusion.

Table 3: Number of Critical Incidents by Type

August – December 2025

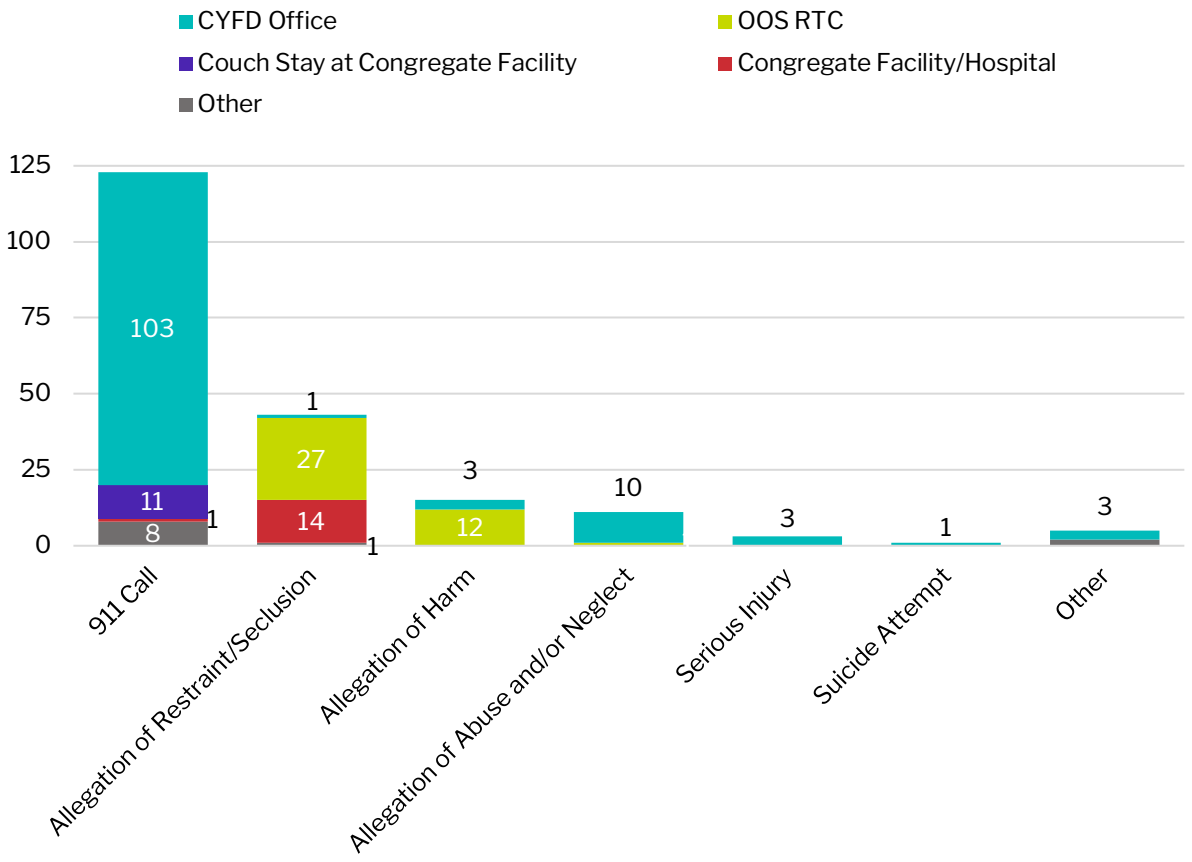
CIR Category	N	%
911 Call	123	61%
Allegation of Restraint/Seclusion	43	21%
Allegation of Harm	15	7%
Allegation of Abuse and/or Neglect	11	5%
Other[26]	5	2%
Serious Injury	3	1%
Suicide Attempt	1	<1%
Total	201	100%

Source: CIRs provided by the State to the Co-Neutrals

[23] This total does not include the number of fatalities or near fatalities. Child fatalities and near fatalities are discussed later in this section.
[24] Ibid.
[25] Because CIRs provided by HCA did not provide identifying information such as the child's FACTS case or person number or the facility where the critical incident occurred, the Co-Neutrals could not analyze them for these purposes. Additionally, HCA sent two CIRs for children in mid-January 2026 that are not included in this data.
[26] CIRs identified as "other" by the State include injuries to staff, providing permission for a child's medical procedure, searching a child's room at an office, a child expressing suicidal ideation, and room assignment changes at a congregate facility. The Co-Neutrals have not concluded that each of these meets the standard of a critical incident.

Figure 5: Type of Critical Incident by Placement Setting[27]

August – December 2025
N=201 CIRs



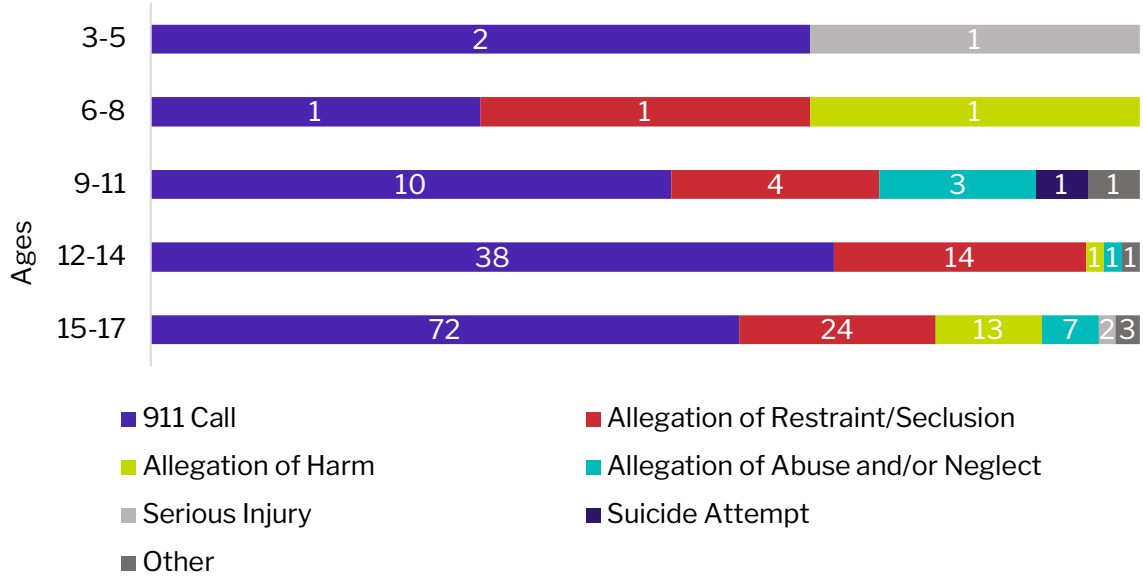
Source: CIRs provided by the State to the Co-Neutrals

The age of children and youth at the time of the critical incidents ranged from three to 17 years, with the majority of critical incidents occurring for youth ages 15 and older.

[27] "Other" includes the following settings: runaway, resource home, and out of state foster/pre-adoptive home.

Figure 6: Age of Child as of Critical Incident, by Incident type[28,29]

August – December 2025
N=201 CIRs



Source: CIRs provided by the State to the Co-Neutrals

Critical Incidents Identified as Allegations of Restraint or Seclusion

Between October and December 2025, the Co-Neutrals identified 182 incidents of restraint and/or seclusion experienced by children placed in out-of-state facilities. These were identified in separate reporting that CYFD and HCA provide to the Co-Neutrals through weekly or bi-weekly reports on the status of children placed out-of-state and the Co-Neutral team's subsequent reviews of these children's FACTS case records.[30] The State provided CIRs for 20 of the 182 restraints and/or seclusions (11%) identified by the Co-Neutrals. All but one of the allegations identified by the Co-Neutral team occurred in a congregate setting, such as an out-of-state facility or during an acute hospitalization, while one allegation of restraint occurred for a child placed in the Receiving Center in Bernalillo County.

The Co-Neutrals discussed with State leadership the lack of tracking of critical incidents, specifically allegations of restraint or seclusion, for children placed in out-of-state facilities. Starting in December 2025, HCA began providing the Co-Neutrals with additional CIRs

[28] A "couch stay" occurs when a child is placed in a group home or shelter overnight to sleep, but is not formally accepted into the group home or shelter as a placement.
[29] Children with multiple CIRs are included more than once in the data, as the figure shows incidence by CIR and not by child.
[30] Additionally, the Co-Neutrals identified one critical incident categorized as an allegation of abuse or neglect as reported to Statewide Central Intake that is not included in the restraint and seclusion totals.

received from PHP for critical incidents involving children placed in facilities. However, the content of these CIRs differed from those previously received from CYFD, and rarely included where the child was placed at the time the critical incident occurred. The State has since indicated that they will be asking for this information from PHP, as the State needs to track how often and where these incidents occur. The Co-Neutrals have also asked the State repeatedly for a policy or guidelines for the use of restraint and seclusion for children in state custody and have been informed that it remains in development.[31]

Due to the number and nature of the CIRs provided by the State and additionally collected by the Co-Neutrals, further analysis of critical incidents, including themes, is provided in Attachment D.

Allegations of Abuse and Neglect (AANE) for Children in State Custody

To date, CYFD has provided the Co-Neutrals with data that includes Statewide Central Intake (SCI) reports screened in and assigned for a PSD investigation between August through November 2025. Most of these data are maintained and tracked in FACTS and do not include reports of AANE in facilities. Since these initial data submissions, the Co-Neutrals have been working with the State to ensure complete data and information are collected and provided responsive to this RO#2 commitment, and consistent with the definition agreed upon by the parties. Attached is a summary prepared by the Co-Neutrals regarding our current understanding of CYFD's screening and investigation of reports of child abuse and neglect (Attachment E).

2. *The State will provide information requested by the Co-Neutrals regarding child fatalities and critical incidents within 15 days of the date the request is made. I request that the Co-Neutrals conduct such independent reviews as they deem appropriate of any or all child fatalities and critical incidents since January 1, 2025 and make any recommendations to me that they deem appropriate regarding such reviews five days prior to the October 7, 2025 and November 15, 2025 status conferences to be held in this matter.* (RO#2, IV.4.b.)

The State provided information on nine child fatalities and 10 near-fatalities that occurred in 2025 for which the Co-Neutral team is undertaking reviews based on information available in the children's FACTS case record and additional information provided by the State. Adjacent to this process, CYFD has been working to develop and refine their internal process for reviewing critical incidents, including fatalities and near fatalities experienced by children in state custody, with the intent to identify areas of CYFD policy, practice, or training that need improvement and/or change. The Co-Neutrals provided feedback on this policy to CYFD which was incorporated into the most recent draft provided.

[31] The State provided a draft CIR Policy and Procedure referencing that CYFD and HCA will work collaboratively when reports regarding use of restraints or seclusion occur for children in CYFD custody in a congregate care setting, however, no additional specifics have been provided.

Please do not hesitate to reach out if you have any questions or concerns.

Sincerely,





Judith Meltzer
Center for the Study of Social Policy

Kevin Ryan
Public Catalyst

cc: Rocio Garcia, Plaintiffs' Counsel
Mike Hart, Plaintiffs' Counsel
Deney Perkins, Plaintiffs' Counsel
Christina West, Plaintiffs' Counsel
Kayla Jankowski, Plaintiffs' Counsel
Katrina Landeta, Plaintiffs' Counsel
Travis Jackson, Jackson Loman Downey & Stevens-Block, P.C.
Eric Loman, Jackson Loman Downey & Stevens-Block, P.C.
Amanda Romero, General Counsel, CYFD
Kathy Kunkel, Deputy Cabinet Secretary, CYFD
Brenda Donald, Chief Operating Officer, CYFD
Benton Lehman, Acting Litigation Manager, CYFD
Jennie Olguin, Litigation Coordinator, HCA

Attachments:

1) Attachment A. 2025 Caseload Compliance
2) Attachment B. 11 14 25 CBSS Plan
3) Attachment Ba. Care.Behavioral.Support.Framework
4) Attachment Bb. CBSS De-Escalation Process
5) Attachment C. Foster Care Recruiter Interviews
6) Attachment D. Critical Incidents
7) Attachment E. Summary of AANE Reporting

Attachment A. 2025 Caseload Compliance

Table 1: Caseload Compliance by Worker Type[1]

December 15, 2025

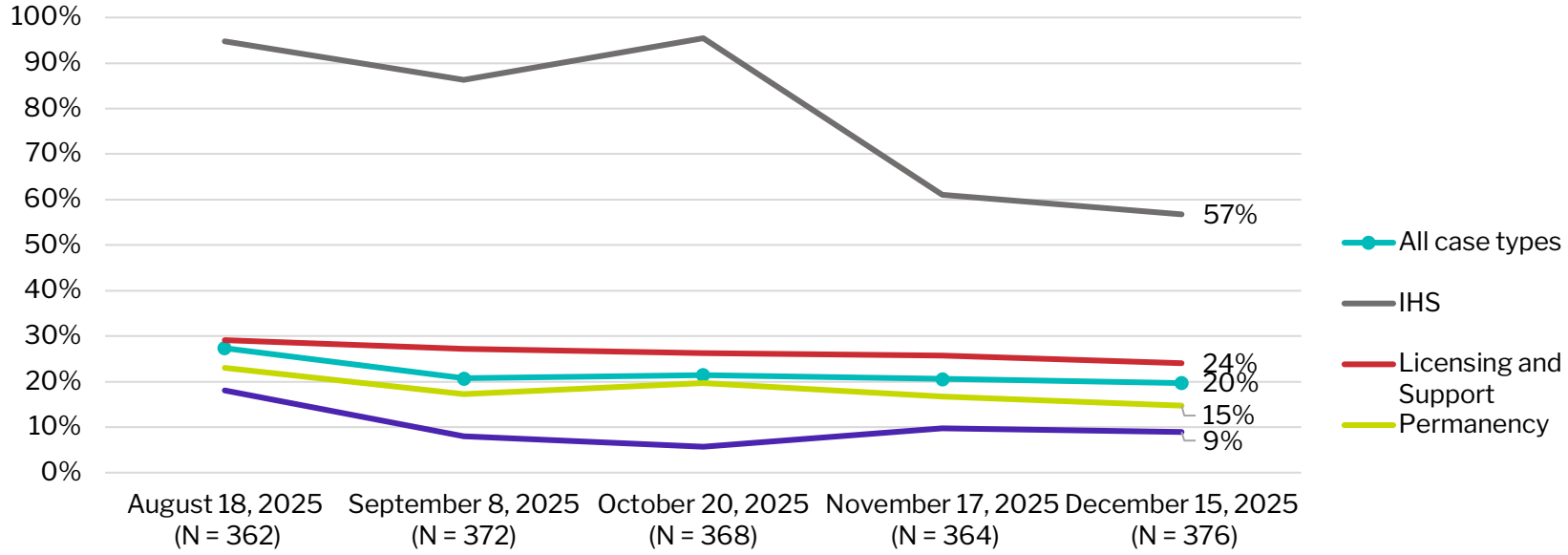
Compliance category	All case types		Investigations		Permanency		Licensing and Support		IHS	
	N	%	N	%	N	%	N	%	N	%
Workers assigned as primary on any case	376	100%	157	100%	163	100%	79	100%	37	100%
Total caseload compliant with standard	74	20%	14	9%	24	15%	19	24%	21	57%
0-50%	37	10%	9	6%	5	3%	4	5%	19	51%
51-100%	37	10%	5	3%	19	12%	15	19%	2	5%
Total caseload above standard	195	52%	96	61%	92	56%	36	46%	8	22%
101-150%	68	18%	19	12%	34	21%	22	28%	1	3%
151-200%	40	11%	23	15%	18	11%	3	4%	2	5%
201-400%	64	17%	37	24%	29	18%	9	11%	4	11%
>400%	23	6%	17	11%	11	7%	2	3%	1	3%
Ineligible for assignment	107	28%	47	30%	47	29%	24	30%	8	22%
Ineligible - role	82	22%	30	19%	40	25%	20	25%	7	19%
Ineligible - new hire with NET	7	2%	7	4%	0	0%	0	0%	0	0%
Ineligible - no NET, hired after 2020, and non-senior	17	5%	10	6%	7	4%	3	4%	1	3%
Ineligible – HR information missing	1	<1%	0	0%	0	0%	1	1%	0	0%

Source: Data provided by EPMO

[1] Excludes temporary workers and workers who have been terminated (5), as well as new cases assigned to county desktops. Workers in a senior title who have a recent NET date were considered eligible for graduated caseloads. Post-2020 hires missing NET dates are assumed NOT to have completed NET unless they have a senior title. In December 2025, a new employee was included for whom no HR information was available. ICPC Permanency cases are counted at the case level and could involve more than one child. Workers assigned as primary to multiple case types are counted in the Co-Neutral data team's compliance analysis under each case type represented in their caseload. In other words, the compliance summary for permanency, for example, shows compliance not just for workers with the job title of "Permanency Coordinator" but rather for all workers assigned as primary to at least one permanency case, regardless of job title.

Figure 1: Percentage of Workers Assigned as Primary on Any Case who are Compliant with the Standard, By Worker Type and Month[2]

August – December 2025



Source: Data provided by EPMO

[2] Excludes temporary workers and workers who have been terminated (7 in August, 6 in September, 3 in October, 5 in November, and 5 in December), as well as new cases assigned to county desktops. Workers in a senior title who have a recent NET date were considered eligible for graduated caseloads. Post-2020 hires missing NET dates are assumed NOT to have completed NET unless they have a senior title. ICPC Permanency cases are counted at the case level and could involve more than one child. Workers assigned as primary to multiple case types are counted in the Co-Neutral data team's compliance analysis under each case type represented in their caseload. In other words, the compliance summary for permanency, for example, shows compliance not just for workers with the job title of "Permanency Coordinator" but rather for all workers assigned as primary to at least one permanency case, regardless of job title.

Table 2: Caseload Compliance by Worker Type and Month[3]

August – December 2025

All case types	18-Aug		8-Sep		20-Oct		17-Nov		15-Dec	
Total caseload compliant with standard	99	27%	77	21%	79	21%	75	21%	74	20%
Total caseload above standard	173	48%	189	51%	190	52%	203	56%	195	52%
Ineligible for assignment	90	25%	106	28%	99	27%	86	24%	107	28%
Total	362	100%	372	100%	368	100%	364	100%	376	100%
Investigations										
Total caseload compliant with standard	28	18%	13	8%	9	6%	15	10%	14	9%
Total caseload above standard	89	57%	102	63%	100	63%	102	66%	96	61%
Ineligible for assignment	38	25%	47	29%	49	31%	37	24%	47	30%
Total	155	100%	162	100%	158	100%	154	100%	157	100%
Permanency										
Total caseload compliant with standard	35	23%	26	17%	30	20%	26	17%	24	15%
Total caseload above standard	74	49%	79	52%	83	55%	96	62%	92	56%
Ineligible for assignment	43	28%	46	30%	39	26%	34	22%	47	29%
Total	152	100%	151	100%	152	100%	156	100%	163	100%
Licensing and Support										
Total caseload compliant with standard	23	29%	22	27%	21	26%	19	26%	19	24%
Total caseload above standard	37	47%	36	44%	36	45%	36	49%	36	46%
Ineligible for assignment	19	24%	23	28%	23	29%	19	26%	24	30%
Total	79	100%	81	100%	80	100%	74	100%	79	100%
IHS										
Total caseload compliant with standard	18	95%	19	86%	21	95%	22	61%	21	57%
Total caseload above standard	0	0%	0	0%	0	0%	9	25%	8	22%
Ineligible for assignment	1	5%	3	14%	1	5%	5	14%	8	22%
Total	19	100%	22	100%	22	100%	36	100%	37	100%

Source: Data provided by EPMO

[3] Ibid.

Children, Youth & Families Department
STATE OF NEW MEXICO

HEALTH CARE AUTHORITY

November 14th, 2025

Judith Meltzer,
Center for the Study of Social Policy
Judith.meltzer@cssp.org

Kevin Ryan
Public Catalyst
Kevinmichaelryan1967@gmail.com

Via Electronic Mail

Re: Requested Information on Emergency Response Behavioral Health Specialists

Dear Co-Neutral Meltzer and Co-Neutral Ryan,

We received your September 18th letter titled *Re: Co-Neutrals' Feedback re: Emergency Response Behavioral Health Specialist Plan* and your November 3rd letter titled *Re: Data and Information Required for the Co-Neutrals to Assess Compliance in January Report to the Arbitrator on Remedial Order #2.* Thank you for your acknowledgement of the State's concerns regarding the requests for data and information that have occurred as a result of the Remedial Orders. As requested for by November 14th, please find CYFD's response to your two letters.

CYFD affirms that the elements requested by the Co-Neutrals for the Emergency Response Behavioral Health Specialists (ERBHS) plan have been completed and submitted. The updated organizational chart placing the ERBHS positions within Children's Behavioral Health Services (CBHS) is finalized, and the full training and support framework has been identified, including behavioral-health competencies, crisis-response and de-escalation training, Mental Health First Aid, QPR, and ongoing coaching, all of which are being delivered as staff are onboarded and which serve to address the needs of Children and Youth in office settings. Clinical supervision is in place and occurring consistently for ERBHS staff, and will continue throughout onboarding, training, and ongoing implementation.

Attached and below is:

1. An updated organizational chart identifying under which division and in which counties the ERBHS staff and supervisor positions will be added, including the names, start dates, and contact information for the Emergency Response Behavioral Health Specialists that have been hired by CYFD;
2. Further information on the training and on-going supports ERBHS staff will receive, including training specific to responding to and de-escalating critical incidents that occur in CYFD office; and
3. An updated timeline by which CYFD expects these staff to be hired, on-boarded, and fully trained to work.

As requested in your November 3rd letter, CYFD will ensure selected workers are available for interviews, and will organize a meeting between the Co-Neutrals and COO Brenda Donald pursuant to RO#2, III.2 regarding the work of the Workforce Strikeforce and Brenda Donald's role as a senior-level PS manager.

Below, please also find a timeline of the efforts the State has made on ERBHS positions as well as the Emergency Response Investigations Specialists.

Timeline of Efforts

1. Under Remedial Order #1, CYFD was ordered to prepare, and submit to the Co-Neutrals and Plaintiffs for comment, a plan to create a new classification of work and add positions to handle on-call, emergency and overnight work.
2. CYFD submitted this plan on April 30, 2025, highlighting the creation of an Emergency Response Behavioral Health Specialist.
3. The State submitted another letter on June 27th, 2025, offering additional detail but continuing to point to funding limitations as a complication in expanding emergency capacity.
4. In reply to the State's June 27th, 2025, letter, the Co-Neutrals emphasized the need for clinical support for Emergency Response Staff; the development of a coordinated system of support, including co-location of local providers; and the assurance that staff will not be trained in any hands-on de-escalation or restraint techniques.

5. As noted by the Arbitrator in Remedial Order #2, the State agreed that State's Emergency Response Behavioral Health Specialists need to be provided with support from clinical professionals/teams when managing crisis situations in office stay settings. The State also agreed on the need for a system of support for emergency response in times of crisis and escalated behaviors, including offering local providers the ability to co-locate. The State was ordered to implement the steps it has agreed to take, including submission of a plan for compliance and obtaining approval of that plan from the Co-Neutrals by October 7, 2025.
6. CYFD has created 25 ERBHS positions, supported by a 10% overnight differential.
7. As of September 24th, 2025, as described in the State's September 24, 2025, submission under Remedial Order #2, Of the 25 ERBHS positions created, 6 were filled and 2 were pending Administrative Services Division (ASD) approval, with procedures for these positions in final draft review.
8. As of October 10, 2025, of the 25 ERBHS positions, 8 were filled, 17 candidates were in the final stages of approval from ASD/OTS, and 3 supervisory positions were in the interview stage.
9. As of today, of the 25 ERBHS positions, 6 are filled in Las Cruces and 5 are filled in Albuquerque, with 2 positions pending, including 1 supervisor.

Further Information on Emergency Response Behavioral Health Specialists

To strengthen compliance and ensure sustainable clinical oversight, CYFD is transitioning the 25 ERBHS positions from Protective Services (PS) to CBHS. This realignment formalizes clinical supervision and integrates the new Care and Behavioral Support Program Framework (Attached). Leadership for this program is provided by CBHS Director Elizabeth Hamilton LCSW and Associate Deputy Dr. Diana P. Trujillo, DSW, LISW, LCSW. Dr. Trujillo brings extensive clinical and operational expertise in child welfare, trauma-informed practice, and crisis intervention, ensuring the program operates under professional clinical guidance consistent with the Remedial Orders. The ERBHS positions have also been retitled Care & Behavioral Support Specialists (CBSS).

The Care and Behavioral Support Program Framework establishes clear program purpose, structure, and competency requirements, including:

- 24/7 coverage to ensure continuous trauma-responsive supervision;
- Non-restraint, trauma-responsive crisis intervention and emotional regulation;
- Clinical consultation and supervision through CBHS leadership;
- Cross-division coordination with PS and the Placement units to support timely transitions; and
- Core training requirements in TBRI, Motivational Interviewing, CPI (non-violent crisis intervention), QPR, Youth Mental Health First Aid, and Medication Management.

Each site operates with direct supervision from CBHS leadership, ensuring real-time support during crisis events and alignment with the non-restraint practice model. Job descriptions and duties for the CBSS and CBSS Supervisor positions have been updated and publicly posted, and are attached. Also attached is the CBSS De-Escalation Process for Youth in CYFD Offices.

Training is ongoing as staff needs are assessed. While hiring and implementation are still underway and some operational details continue to develop, the sequencing of onboarding, training, and supervision activities has been defined and is actively being implemented. In addition, a weekly meeting has been established with PS and CBHS to continue open dialogue regarding the transition of these positions to CBHS and the needs of children. CYFD currently plans to recruit and fill all vacant CBSS and CBSS supervisor positions by the end of the year, and all vacant positions will be posted by close of business on 11/14/25.

In addition to the above outlined supports for children in office settings, the State remains focused on identifying and supporting resource parents and relatives and increasing access to behavioral health services to allow children to have successful family-based placements.

Thank you for your questions, and please let us know if you have any further questions.

Sincerely,

Benton Lehman,
Acting Litigation Manager,
CYFD

Cc: Kari Armjio, Cabinet Secretary, HCA
Valerie Sandoval, Acting Cabinet Secretary, CYFD
Kathleen Kunkel, Deputy Cabinet Secretary, CYFD, and Kevin S. Executive Director
Kathey Phoenix-Doyal, Deputy Cabinet Secretary, CYFD
Rose Bryan, General Counsel, HCA
Amanda Romero, General Counsel, CYFD
Brenda Donald, Chief Operating Officer, CYFD
Jennie Olguin, Litigation Coordinator, HCA

Care and Behavioral Support Program Framework

This framework outlines CYFD's operational standards for providing trauma-responsive care, supervision and stability to children and youth in need of transitional care while awaiting permanent home or appropriate treatment placement. It defines the purpose, structure, training, and performance expectations of the Care and Behavioral Support Program to ensure consistent, high-quality support across all service areas.

Program Purpose

The Care and Behavioral Support Specialist (CBSS) program provides short term, trauma-responsive care and supervision for children and youth experiencing placement disruptions or transitions within CYFD's Protective Services. The program ensures that every child receives consistent, compassionate, and safe support while awaiting or transitioning between placements — reducing trauma exposure, preventing escalation, and promoting stability.

Program Goals

- Ensure Child Safety and Stability – CYFD staff provide consistent, trauma-responsive supervision and behavioral support so that children and youth experience safety, predictability and stability while in transitional care.
- Promote Emotional Regulation and Healing – Staff apply evidence based, trauma responsive practices that help youth calm, recover, and build coping skills.
- Develop Workforce Expertise – Build and support a skilled, trauma-informed Care and Behavioral Support Specialist workforce trained in crisis response, de-escalation, and compassionate care ensuring that youth are supported by professionals equipped to meet their behavioral and emotional needs.
- Strengthen System Coordination – Collaborate across CYFD divisions and community partners to ensure holistic child support.

Program Structure

Supervisor Level – Care and Behavioral Support Specialist Supervisor

• Provides supervision, coaching, and leadership to staff.
• Oversees quality of care, documentation, and adherence to trauma-responsive standards.
• Coordinates staffing, schedules, and professional development.
• Serves as liaison between Protective Services, Behavioral Health, and placement teams.
• Leads debriefings, incident reviews, and program improvement efforts.

Frontline Level – Care and Behavioral Support Specialist

• Provides direct care and supervision for children and youth in transition.
• Uses trauma-responsive strategies to de-escalate behavior and ensure safety.
• Coordinates daily structure, hygiene, meals, and activities that foster predictability and wellness.

• Collaborates with supervisors and multidisciplinary teams to plan and implement care strategies.
• Maintains accurate, timely documentation.
• Participates in deep cleaning, inventory control, and resource management.
• Engages community donors and volunteers to meet youth needs (e.g., clothing, hygiene, luggage).
• Develops activity calendars and wellness opportunities that promote positive engagement.

Core Program Functions

- 24/7 Coverage for continuous supervision.
- Crisis Response and De-escalation emphasizing safety and emotional regulation.
- Trauma-Responsive Practice grounded in safety, trust, empowerment, and cultural humility.
- Interdisciplinary Collaboration among CYFD divisions, hospitals, schools, and community partners.
- Accountability and Documentation through standardized forms and timely reporting.
- Resource Development leveraging community partnerships for daily programming to support youth well-being.

Staff Training and Competency Development

All Care and Behavioral Support staff receive initial and ongoing training in core competencies designed to ensure trauma-responsive, safe, and effective care.

Required Core Trainings:

- Trust-Based Relational Intervention (TBRI) – Building connection, empowerment, and correction through relationship.
- Motivational Interviewing (MI) – Supporting behavior change through empathy and collaboration.
- Crisis Prevention and Intervention (CPI) – Non-violent crisis intervention and safe physical management.
- Cardiopulmonary Resuscitation (CPR) & First Aid – Emergency response and health safety.
- Question, Persuade, Refer (QPR) – Suicide prevention and early intervention.
- Medication Management – Safe storage, tracking, and administration support.
- Youth Mental Health First Aid (Y-MHFA) – Recognizing and responding to youth mental health needs.
- Documentation Standards – Accurate, timely, and trauma-sensitive recordkeeping.

Expected Outcomes

- Improved child safety and stability during placement transitions.
- Reduced behavioral escalation and crisis recurrence through proactive, trauma-responsive care.

- Enhanced workforce skill and retention via consistent supervision and training.
- Strengthened coordination across CYFD and community partners.
- Positive youth experiences centered on dignity, connection, and safety.

Evaluation and Continuous Improvement

• Ongoing review of documentation, incident data, and youth outcomes.
• Regular debriefings and reflective supervision sessions.
• Quarterly quality improvement meetings and training updates.
• Feedback from youth and staff used to refine practice and policy.

Verbal De-Escalation & Crisis Communication for Youth in CYFD Offices

This section provides a structured, trauma-informed process for responding when a youth begins to escalate in a CYFD office or temporary placement setting. It is designed for CBSS staff, supervisors, and behavioral health partners.

Office Response Protocol

Purpose: To ensure safety and support for youth and staff through consistent, trauma-informed, and coordinated de-escalation steps.

1. Recognize Early Warning Signs

- Notice changes in body language, tone, or pacing (e.g., agitation, withdrawal, restlessness, crying, or verbal outbursts).
- Identify potential triggers (placement loss, hunger, fatigue, fear, feeling ignored, or staff turnover).
- Maintain situational awareness—reduce environmental stressors (noise, crowding, unnecessary staff presence).
- Goal: Intervene early, before the youth reaches a crisis level.

2. Begin Verbal De-Escalation and Engagement

- Use calm, low voice and open body posture.
- Avoid arguing, lecturing, or issuing multiple directives.
- Focus on connection before correction—validate feelings ('I can see you're upset,' 'That makes sense you'd feel that way').
- Offer choices, not ultimatums ('Would you like to talk here or step outside?').
- Apply strategies from CPI other approved de-escalation training.
- Refer to the youth's engagement plan for known calming strategies or preferred supports (music, stress toy, water, quiet space).

Goal: Help the youth regulate through empathy, respect, and safety cues.

3. Alert Supervisor, PS on call and Behavioral Health Support on call

- Notify the CBSS Supervisor immediately when de-escalation efforts begin.
- If escalation continues or safety concerns arise:
- Make a phone call to the CBHC on-call for consultation and request additional steps.
- Provide clear information: youth name, behaviors observed, current environment, staff present, and immediate needs.
- CBHC may provide real-time coaching or coordinate crisis stabilization or transport if required.

Goal: Activate additional clinical support before a crisis peaks.

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4. Maintain Safety of All Individuals

- Ensure staff positioning allows for safe exit routes.
- Move other youth or visitors away from the area when possible.
- Keep at least one staff member focused solely on the escalating youth while another monitors the environment.
- Do not use physical intervention
- Follow all CPI or agency-approved physical safety protocols if necessary.

Goal: Contain the situation while preserving dignity and minimizing harm.

5. Stabilization and Recovery

- Once the youth begins to calm, offer space, hydration, or sensory items.
- Use a grounding approach: quiet tone, simple questions, gentle re-orientation to safety.
- Do not rush conversation or consequences.
- Document the de-escalation process and actions taken.

Goal: Restore calm and prepare for reflective conversation.

6. Post-Incident Debrief

- Conduct two debriefs:
- With the youth: Offer empathy and discuss triggers, needs, and what helped.
- With staff: Identify what went well, what could improve, and supports needed.
- Supervisor ensures documentation and updates the youth's Engagement or Safety Plan as needed.
- If patterns emerge, schedule a team meeting to adjust strategies.

Goal: Promote learning, accountability, and ongoing improvement.

7. Documentation

- All incidents must include:
- Time and sequence of escalation and de-escalation steps.
- Staff involved and actions taken.
- Any use of safety interventions.
- Notification to supervisor, CBHC, PS on-call, or others.
- Youth's condition after incident and follow-up plan.

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ATTACHMENT B. Findings from Co-Neutrals' Interviews with CYFD Resource Home Recruiters, October 2025 through January 2026

Overview

In the arbitrator's first Remedial Order (RO#1), the arbitrator determined:

> *By February 17, 2025, CYFD will dedicate one placement staff worker located in each of the five high-needs counties identified in the CAP (Bernalillo, Dona Ana, Santa Fe, San Juan, and Chavez/Eddy) to focus exclusively on foster placement recruitment in those counties. The individuals dedicated will be identified by name to the Co-Neutrals in writing by February 10, 2025. The individuals designated will maintain their exclusive focus on recruitment in the five high-needs counties for not less than six months from February 17, 2025 so that the Co-Neutrals can assess whether this strategy-agreed to in the CAP-is proving effective. The Placement Staff dedicated to this work must be in a job category approved by the Co-Neutrals (i.e., if the Co-Neutrals require the job to be performed by a Licensing and Support Specialist, then a Navigator may not fill the role). On or before February 10, 2025, CYFD will identify to the Co-Neutrals, the Plaintiffs and the arbitrator the person assigned responsibility for ensuring this directive is carried out.*

This summary discusses themes from interviews with CYFD staff tasked with foster care recruitment and navigation responsibilities in five high-need counties (HNCs): Bernalillo, Dona Ana, Eddy/Chaves, San Juan, and Santa Fe. Following initial rounds of monthly interviews between March and August 2025 with recruiters, the Co-Neutral team conducted an additional three rounds of interviews in October 2025, December 2025, and January 2026.[1] The interviews involved five staff, one from each HNC. The main goals of the interviews were to continue learning about recruitment efforts – what worked well, where there were challenges, and what additional resources might be needed – and to determine whether the focused recruitment strategies are proving effective. In addition, the Co-Neutral team used the interviews to hear relevant updates on: key stages of the recruitment and navigation processes, the latest recruitment data, staff training and support, as well as other responsibilities that the staff were assigned. The Co-Neutral team also asked the staff to reflect on their overall experiences since starting in their roles and share what strategies they recommend to potentially increase the number of licensed resource families.

High-Level Findings

Based on the 14 interviews conducted between October 2025 and January 2026, the Co-Neutral team documented updates related to the key themes outlined below, most of which were also highlighted in the prior summary of March through August 2025 interviews that was included in Attachment B of the Co-Neutrals' September 26, 2025 report. Some of the takeaways emerged based on reviewing recruitment data shared by CYFD, which the Co-Neutral team used to monitor a series of key metrics. The Co-Neutral team continued to review the latest Navigation Tracking Spreadsheet ("navigation spreadsheet") with staff to

[1] In January 2026, the Co-Neutral team interviewed staff in four of the five HNCs due to a vacancy in Dona Ana county.

learn more about how specific inquiries and licensing applications were handled. Other takeaways were derived from ratings that staff were asked to assign to various key steps in the recruitment process (see Appendix Tables A1 and A2 of this attachment).

Staff Capacity Challenges

With respect to staff capacity, the counties maintained consistent permanent, dedicated recruiter staffing during most of the months since October 2025. However, in late December 2025/early January 2026, the recruiter in Dona Ana left their role and the recruiter in Eddy/Chaves left in January 2026. Given the timing required for hiring and onboarding, these staff transitions seem likely to slow recruitment efforts in those counties. On a more positive note, given the removal of most navigation duties from the recruiter's responsibilities (beginning in December 2025), the recruiters reported greater ability to manage their job functions in more recent interviews. The separation of recruitment and navigation functions (applicable to each HNC except Bernalillo), was largely viewed as a positive for recruiters, some of whom had reported growing frustrations with an increased focus on navigation leading up to the shift in responsibilities (described later under *Multiple Shifts in Focus*).

Unclear Unifying Recruitment and Navigation Strategy and Protocols

Over the course of the interviews going back to March 2025, staff shared that they were largely unfamiliar with the county-specific recruitment plans, and none were able to identify a specific monthly or annual recruitment target. In December 2025, the recruiters reported some progress in this area with the formation of local County-Based Recruitment Teams (CBRTs). In January 2026, the recruiters reflected positively on the direction of the CBRTs and the prospect of having a clear strategy and articulated goals for their counties. As recently as October 2025, when staff were asked about their county recruitment plans and any updates, none of the staff had any updates on the plans and staff in two counties still had not seen a plan – despite plans having been created in each county earlier in the year. In October 2025, only one staff stated that they felt like there was a clearly communicated strategy for recruitment in their county and none of the staff were aware of any monthly recruitment targets, either with respect to the number of events, engagements, inquiries, or families that begin the licensing process. As of January 2026, three of the four recruiters interviewed had already participated in one CBRT meeting, explaining that the teams would meet monthly and seek to generate quarterly goals and targets. As the CBRT process is only recently underway, the Co-Neutral team was not able to gauge the effectiveness of these efforts. More broadly related to strategy and protocol, in the latest interviews, recruiters shared positive reflections on receiving increased guidance from leadership, with particular emphasis on insights provided by Tricia Howell and Maureen Hefferman (described later under *Lack of Formalized Training*).

Lack of Formalized Training

With respect to training, while all of the staff previously shared that they received very little initial formal training on how to perform recruitment and navigation functions, beginning in the December 2025 interviews, the staff all reported more consistent training. When asked about training in the January 2026 interviews, staff talked about weekly trainings provided by Renee Fitz and Maureen Hefferman focused on recruitment strategies and leveraging the

CBRTs. Prior to that, the Co-Neutral team heard varying accounts of training consistency and effectiveness. Despite the lack of formal training early on, the recruiters reported continuing to feel very supported by their respective supervisors and receiving guidance on most critical job functions.

As reported in the prior summary, staff stated that while they had seen some guidelines for how to conduct the recruitment and navigation duties, the department did not have formal training or standard operating procedures (SOPs). During the October 2025 interviews, staff in three of the five counties stated that they were not aware whether a training manual existed for their role. In December 2025, staff in one county still had not seen the training manual.

The recruiters also stated that in January 2026 they were participating in ReadiNM training – the pre-service training used for new resource homes in New Mexico – to gain more perspective on what resource parents experience in training.

Inquiry Volume was Relatively Flat, with Declines in Three of Five HNCs

As part of the navigation spreadsheet review with staff, the Co-Neutral team continued to assess the total inquiries and in-progress applications. The inquiry data from the December 2025 navigation spreadsheet (the most recent data reviewed by the Co-Neutral team) reflects that from January 1, 2025 to December 31, 2025, the number of inquiries in the five counties remained relatively flat (see Appendix Table A3). The average monthly inquiries (51) across the five HNCs from September through December 2025 were below the average (58) from January through August 2025. Between these two periods, average monthly inquiries declined in three of the five HNCs. Overall, the average monthly inquiries between the two periods declined by 12 percent, with the largest declines in Eddy/Chaves County (29% decline) and Bernalillo County (24% decline). As stated in the prior summary, the Co-Neutral team's ability to gauge inquiry inflow is limited in that the team cannot compare recent numbers to the inquiry totals going further back in time (e.g., from the prior year). The Co-Neutral team did not ask the recruiters to reflect on the downward trends, although the recruiters cited fewer recruitment events in the latter months of the calendar year, attributing the decline in inquiries to multiple factors, including the winter holidays, less funding for event fees, and more stringent vetting of event appropriateness (which reportedly began in August 2025). Recruiters in three counties expressed that they felt CYFD was sometimes too stringent in its event selection criteria and that they did not always agree with CYFD's view on certain events. For instance, the recruiters shared multiple examples when they thought events would have allowed access to prospective resource parents but those events were not approved by leadership due to concerns about audience fit and demographics.

Licensed Community Homes Increased Slightly

The December 2025 navigation spreadsheet reflected that from January 1 to December 31, 2025, the number of newly licensed community homes in the five HNCs saw a slight increase in the overall monthly average, driven mostly by increases in Bernalillo County (see Appendix Table A4). The average number of monthly licensed community homes from September

through December 2025 (8.8) reflected a 75 percent increase from the monthly average from January through August 2025 (5.0). Between these two periods, the monthly averages increased in three counties (Bernalillo, Eddy/Chaves, and Dona Ana), remained the same in San Juan County, and decreased in Santa Fe County. As was the case in the prior summary, the Co-Neutral team acknowledges that it takes time to detect an increase in newly licensed homes as CYFD aims to complete home studies within 120 days. Similar to the inquiry data, the Co-Neutral team's ability to analyze trends and assess performance improvement is limited in the absence of prior year data.

Staff Did Not Always Know the Current Status of Inquiries or In-Progress Licensing Applications

When the Co-Neutral team reviewed the latest inquiry and application data with the recruiters, there were increased instances in which staff did not know the current status of either recent inquiries or in-progress licensing applications. In the December 2025 interviews, recruiters reported less familiarity with prospective families who had recently inquired as well as those who had active licensing applications. Whereas in previous interviews the lack of familiarity likely stemmed from staff being new and not having been involved with certain inquiries or applications – which may have been submitted months earlier – the recent lack of familiarity seems to stem from the recruiters becoming less involved in the navigation work.

During the October 2025, December 2025, and January 2026 interviews, the Co-Neutral team reviewed 129 *recent inquiries* across the five counties (received from August through December 2025) and asked for any relevant updates as of the date of the interviews. The 129 inquiries represented 47 percent of all inquiries that were received across the counties during those months.

Of the 129 inquiries, staff reported having no information on the status of 13 percent of the inquiries (compared to 12% in the prior summary). However, for the inquiries submitted in December 2025, staff did not have updates for 63 percent of inquiries.

In terms of instances where the recruiters did not have updates on current *in-progress licensing applications*, the frequency of those instances increased significantly in the latest interviews. During the January 2026 interviews, staff did not have updates for 69 percent of the in-progress applications reviewed – compared to five percent of the applications reviewed during the prior two interviews. Staff not having knowledge of the status of more than two-thirds of open applications reviewed demonstrates a disconnect in communication between the recruiters and the licensing and support team.

Recruitment Challenges Tend to be Concentrated in the Early Steps of the Process

When staff were asked to rate how each step of the recruitment process was going, "advertising/getting the word out," "finding recruitment events," and "getting prospective resource parents to submit inquiries" – all steps at the front end of the process – were rated the lowest. During the latest three months of interviews, "finding recruitment events" received the lowest average ratings and reflected the largest decline in average ratings from

the April through August 2025 period (see Appendix Tables A1 and A2). As stated earlier, staff attributed some of the challenges to stricter criteria for event participation. When the Co-Neutral team asked about the rationale for stricter criteria, most explained that leadership determined that certain audiences were not worthwhile recruitment targets. During the October interviews, two recruiters explained that leadership stated that a lack of funding for staff time or other resources also contributed to fewer approved events between July 1 and October 1, 2025. As stated, staff in three counties cited examples where they disagreed with certain decisions to deny event requests. One recruiter shared that there were several events that they did not submit requests for because they assumed they would not be approved.

"Getting prospective resource parents to submit inquiries" was the second lowest rated step during the last three months of interviews and the lowest rated step across all interviews. Staff frequently cited instances where prospective resource families demonstrated initial interest, but did not ultimately choose to make a formal inquiry.

"Advertising/Getting the word out" was the third lowest rated step (among steps with consistent ratings across all the interviews), although its ratings did not decline over the last three months of interviews. Staff reported a lack of clarity on what the broader advertising efforts entail and where those campaigns were targeting. Staff consistently reported seeing social media posts, but were not as familiar with larger-scale campaigns. Many staff suggested that they were aware a campaign was in development, but did not know the timing or what the campaign entailed. When asked about key strategies going forward, staff commented on the importance of getting the word out.[2]

Multiple Shifts in Focus between Recruitment, Retention, and Navigation

While during interviews from April through August 2025, staff often reflected on fluctuations between recruitment and retention, staff emphasized greater shifts in the focus on navigation duties in the latest round of interviews. During the October 2025 interviews, staff reported spending an average of 70 percent of their time on navigation, a source of frustration for some recruiters who viewed this as taking away from the recruitment functions they were hired to perform. In October 2025, three of the recruiters reported spending 80 percent or more of their time on navigation. In December 2025, recruiters reported spending 35 percent of their time on navigation, which declined to 16 percent in January 2026, largely a function of navigation duties being removed from the recruiters' responsibilities (with the exception of staff in Bernalillo county). Recent interviews referenced additional periods when recruitment efforts appeared diminished in favor of other initiatives. For example, recruiters shared that they focused most of their time in November 2025 helping to organize donation and care kit drives for infants and youth in

[2] As reported in the prior summary, staff often did not have any knowledge of the latter steps (beyond "scheduling orientations"). In those instances, staff largely chose not to provide a rating. As stated in the Appendix, the ratings for those latter steps in the process are based on fewer ratings from staff and should be interpreted with some caution.

foster care; and going to schools, businesses, other community organizations, etc. The recruiters also reported taking on responsibility for orientation meetings for prospective resource parents, a change they generally reflected positively on.

Scheduling ReadiNM Trainings

During earlier interviews, staff described scheduling the ReadiNM trainings as one of the biggest challenges in the licensing process. More recently, staff reported fewer challenges, citing more opportunities for one-on-one and make-up sessions for prospective resource parents.

Complex Data Tracking Systems

The Co-Neutral team asked fewer questions about data tracking in the most recent interviews, but did hear about some ongoing challenges. As recently as October 2025, staff commented on frequent changes to tracking requirements and duplication across multiple systems (e.g., data spreadsheets versus Binti). In the December 2025 interviews, the team did not have any major updates or issues with data tracking. At that time, staff shared that the recruiters and navigators had recently come together to clarify concrete timelines for data tracking to ensure greater clarity and consistency among the team.

Ongoing Procurement Challenges

The Co-Neutral team heard about numerous challenges related to the procurement process in earlier interviews, including a lack of clarity on the process, the amount of time spent completing purchase requests, and delays in securing resources. In later interviews (conducted in July through October 2025), recruiters explained that funding was not yet available in the new fiscal year. In the latest interviews, staff stated that funding was now available for purchase requests, but none of the staff said that they had needed to submit a purchase request in the new fiscal year. Given that the staff had not submitted recent requests, the Co-Neutral team was not able to determine whether prior issues with the purchase request process have been remedied.

Access to Resources

The Co-Neutral team continued to ask staff if they had the resources they needed to effectively implement recruitment strategies in their county. Despite no reported purchase request activity since July 2025, the staff largely stated that they had the resources they needed, including both recruitment materials as well as training and support provided by leadership.

Staff Reflections

In the January 2026 interviews, when the four recruiters who were interviewed were asked to describe whether they felt their experience had gotten better, worse, or stayed the same since when they started their positions, three of the staff said things were better and one gave examples of both positive and negative changes. Positive reflections generally focused on greater role clarity and more training and support. One staff commented on a continued lack of consistency with respect to both overall strategy and having a strong presence at community events. During the January 2026 interviews, the team asked the staff what they

thought the keys to success are going to be in order for CYFD to effectively recruit new resource parents and move them through the licensing process. Staff cited a variety of strategies, including better communication and collaboration across teams (e.g., recruiters, permanency, licensing and support, etc.), more consistent approaches, doing more to get the word out, and leveraging the CBRTs to drive a cohesive strategy.

Conclusion

Overall, informed by the nine months of interviews conducted with CYFD recruiter staff and in review of the data on the number of inquiries for new community homes as well as data on the number of newly licensed community homes, the Co-Neutrals are unable to conclude that this strategy, as implemented, has been or appears likely soon to be effective. The initiative was slow to establish itself (as full-time recruiters were not in place in all HNCs until July 2025), and the recruiters recounted frequent shifts in focus between recruitment, navigation, and retention activities, with no clearly articulated set of strategies. During the same period, staff reported fewer and fewer recruitment events, a byproduct of multiple factors, including a more stringent event approval process. It was not clear to the Co-Neutral team to what extent a reported pause in funding between July and November 2025 may have also impacted event participation.

The new CBRTs – launched in December 2025 – carry promise for creating better strategic clarity. The CBRTs will produce goals and targets, something that the recruiters were largely unable to articulate during the Co-Neutral team's interviews, although the impact of those efforts are still to be seen. The strategies that emerge through the CBRTs will require ongoing monitoring and access to necessary resources to ultimately determine whether the focus on recruitment in high-needs counties is effective. Additionally, the CYFD staff who are asked to participate as members of these teams must not be stretched so thin as to compromise their ability to undertake the responsibilities that are already required by their jobs.

In terms of training, only recently did recruiters comment that they felt they were receiving consistent training and formal support that was helping to create sufficient role clarity and provide adequate guidance.[3] That said, the contributions of newer resources – like those staff referenced earlier – appear to be adding value and contributing to the recruiters' increased sense of clarity.

Going forward, recruitment efforts will likely be slowed in Dona Ana and Eddy/Chaves counties, where recruitment positions need to be filled again. Further, with the exception of Bernalillo county community home licensures, the 2025 inquiry and community home licensure data fail to demonstrate notable improvement throughout the year.

[3] CYFD informed the Co-Neutrals that it has established a position dedicated to supervising and supporting the five recruiters. As noted earlier, Renee Fitz has been providing support and training to the recruiters and she will assume this role officially in this newly dedicated position.

Appendix

Recruitment Step Ratings

Staff were asked to rate how well they thought each of the steps in the recruitment process was going in their county on a scale of one to five, five being "Extremely well" and one being "Not well at all."

Table 1: Recruitment Step Ratings

April – August 2025

Recruitment Step	28-Apr	3-Jun	30-Jun	29-Jul	27-Aug	Overall (Apr-Aug)
Advertising/Getting the word out	3.2	3.8	4.5	5.0	2.8	3.9
Finding recruitment events	3.6	3.0	4.5	4.0	3.6	3.7
Getting prospective resource parents to submit inquiries	2.3	3.6	3.6	3.5	3.4	3.3
Responding to inquiries	4.3	4.2	4.6	4.5	4.4	4.4
Scheduling orientations	4.1	4.2	4.5	4.3	4.1	4.2
Reviewing applications*	4.5	4.3	4.4	4.8	4.3	4.4
Scheduling ReadiNM trainings*	3.3	4.5	4.5	3.7	2.5	3.7
Conducting ReadiNM trainings*	n/a	n/a	5.0	n/a	3.0	4.0
Conducting home studies*	4.0	4.5	4.0	n/a	n/a	4.2
Conducting background checks*	5.0	4.5	4.0	n/a	n/a	4.5
Application approval*	4.5	3.5	4.5	n/a	3.0	3.9
Average	3.9	4.0	4.4	4.2	3.7	4.0

Source: Co-Neutral team interviews
* In the respective timeframes, at least one county did not provide a rating. As a result, the rating averages do not reflect all counties, nor do they reflect complete ratings across each of the interviews.
Note: "n/a" reflects instances where none of the staff provided ratings in a given month. The Co-Neutral team did not collect ratings during the initial interviews in March 2025.

Table 2: Recruitment Step Ratings[4]

October 2025 – January 2026

Recruitment Step	7-Oct	5-Dec	6-Jan	Overall (Oct-Jan)	Change from Apr-Aug
Advertising/Getting the word out	3.9	3.8	3.9	3.9	0.0
Finding recruitment events	2.8	3.0	2.9	2.9	-0.9
Getting prospective resource parents to submit inquiries	3.0	3.2	3.3	3.2	-0.1
Responding to inquiries	4.4	4.6	4.5	4.5	0.1
Scheduling orientations	3.0	4.4	4.8	4.1	-0.2
Reviewing applications*	4.0	4.7	5.0	4.6	0.1
Scheduling ReadiNM trainings*	4.0	4.0	4.0	4.0	0.3
Conducting ReadiNM trainings*	n/a	4.0	n/a	4.0	0.0
Conducting home studies*	n/a	4.0	4.0	4.0	-0.2
Conducting background checks*	n/a	4.0	n/a	4.0	-0.5
Application approval*	n/a	4.5	4.0	4.3	0.4
Average	3.5	3.9	4.0	3.8	-0.2

Source: Co-Neutral team interviews
*In the respective timeframes, at least one county did not provide a rating. As a result, the rating averages do not reflect all counties, nor do they reflect complete ratings across each of the interviews.

[4] "N/a" reflects instances where none of the staff provided ratings in a given month.

Table 3: Inquires by Month

January – December 2025[5]

Month	Bernalillo	Dona Ana	Eddy/Chaves	San Juan	Santa Fe	Total
January	30	8	7	5	7	57
February	31	11	10	3	10	65
March	39	7	6	3	1	56
April	24	9	7	4	5	49
May	24	5	3	2	2	36
June	35	5	8	2	4	54
July	47	11	11	3	2	74
August	37	10	10	5	7	69
September	29	7	8	5	2	51
October	33	7	4	19	8	71
November	18	8	4	2	5	37
December	22	7	6	3	6	44
Total	369	95	84	56	59	663
Avg. (Jan-Aug)	33	8	8	3	5	58
Avg. (Sept-Dec)	26	7	6	7	5	51
Avg. (Jan-Dec)	31	8	7	5	5	55

Source: CYFD's Monthly Navigation Spreadsheet

[5] These data reflect updated numbers from the most recent navigation spreadsheet, which differ slightly from the prior summary.

Table 4: Newly Licensed Families by Month

January – December 2025[6]

Month	Bernalillo	Dona Ana	Eddy/Chaves	San Juan	Santa Fe	Total
January	1	2	2	1	0	6
February	1	0	0	0	0	1
March	5	0	0	2	1	8
April	1	0	1	0	0	2
May	4	0	1	1	1	7
June	5	0	0	0	2	7
July	2	1	1	0	0	4
August	5	0	0	0	0	5
September	2	0	0	2	0	4
October	9	2	2	0	0	13
November	5	0	1	0	0	6
December	6	2	3	0	1	12
Total	46	7	11	6	5	75
Avg. (Jan-Aug)	3.0	0.4	0.6	0.5	0.5	5.0
Avg. (Sept-Dec)	5.5	1.0	1.5	0.5	0.3	8.8
Avg. (Jan-Dec)	3.8	0.6	0.9	0.5	0.4	6.3

Source: CYFD's Monthly Navigation Spreadsheet

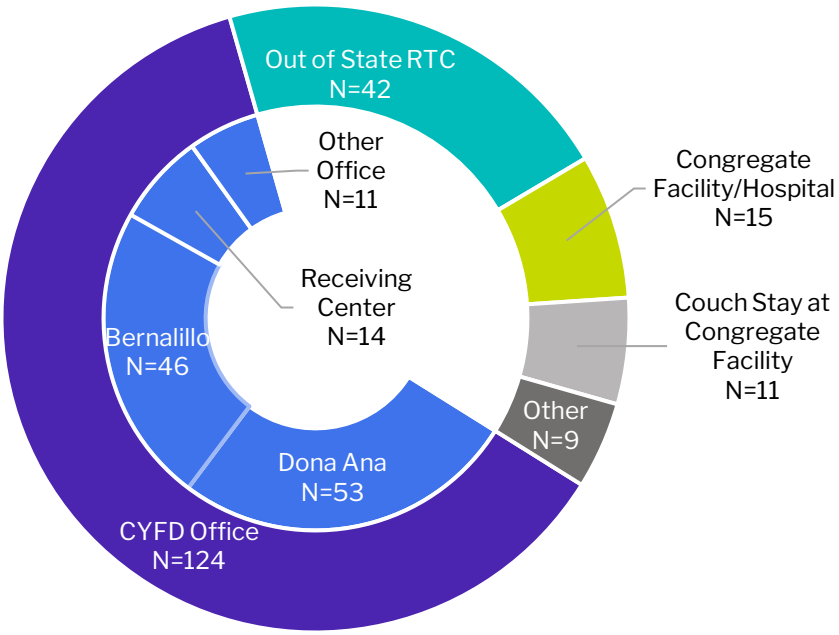
[6] Ibid.

Attachment D. Additional Analysis of Critical Incidents

For the period of August 18 through December 31, 2025, the Co-Neutrals identified a total of 364 critical incidents involving children in care. This includes those critical incident reports (CIRs) provided to the Co-Neutrals by CYFD or HCA, and additional ones independently identified by the Co-Neutrals through validation work and research. The analysis within this report includes first a discussion of those critical incidents reported by the State to the Co-Neutrals, and is followed by analysis of critical incidents identified separately by the Co-Neutrals (primarily, instances of restraint or seclusion of children in out-of-state facilities).

The State provided the Co-Neutrals with notice of 201 critical incidents pertaining to 65 unique children that occurred between August 18 and December 31, 2025.[1] The majority of State-reported critical incidents occurred in CYFD offices (124 incidents, 62%), with most critical incidents occurring in the Bernalillo and Dona Ana offices.

Figure 1: Settings of Critical Incidents[2,3]
August – December 2025
N=201 CIRs



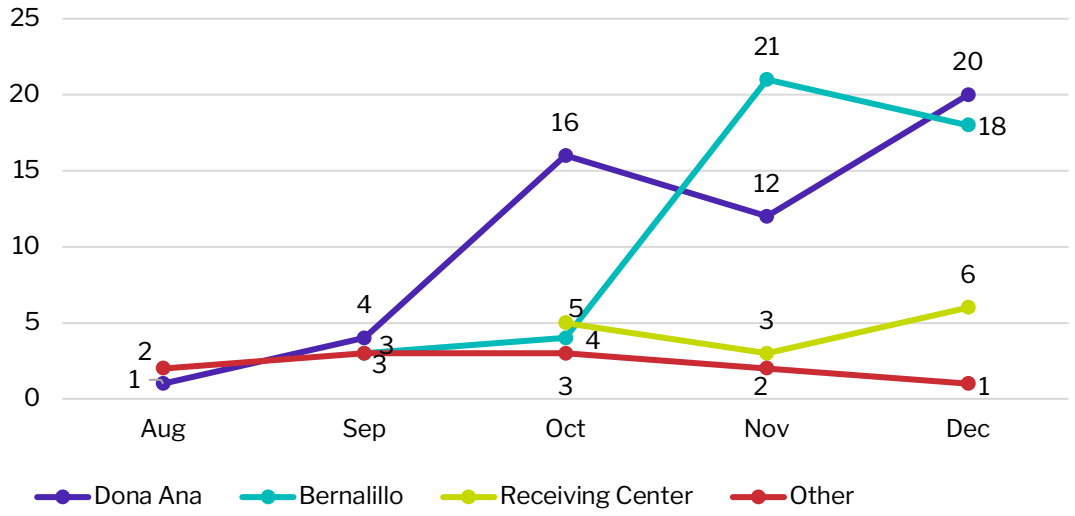
Source: CIRs provided by the State to the Co-Neutrals

[1] This total does not include the number of fatalities or near fatalities.
[2] As reported on CIRs submitted by the State.
[3] "Other" contains the following settings: runaway, resource home, and out of state foster/pre-adoptive home. Congregate Facility/Hospital includes the following settings: unspecified facility, congregate facility-acute hospital, in-state residential treatment center (RTC), and shelter.

In October 2025, CYFD implemented a change in practice regarding children placed in CYFD county offices, specifically that children would only stay overnight in the Dona Ana and Bernalillo County offices. The CIRs provided by the State demonstrate the majority of critical incidents in offices occurred in Dona Ana and Bernalillo counties starting in October after this change was made.

Figure 2: Critical Incidents in CYFD Offices, by Month[4]

August – December 2025
N=124 CIRs



Source: CIRs provided by the State to the Co-Neutrals

While the majority of children experienced one critical incident (37, 57%), 12 children each experienced four or more critical incidents between August and December 2025 (18%) according to the CIRs (Table 1). Two children alone account for more than a quarter of all critical incidents (53 CIRs total, 26%).[5]

[4] "Other" includes placements in the Alamogordo, Chaves, Clovis, Curry, Lea, Otero, and San Migual county offices.
[5] One child experienced 30 critical incidents in an out-of-state RTC, while the second child experienced 23 critical incidents in a CYFD office.

Table 1: Number of Critical Incidents, by Child

August – December 2025

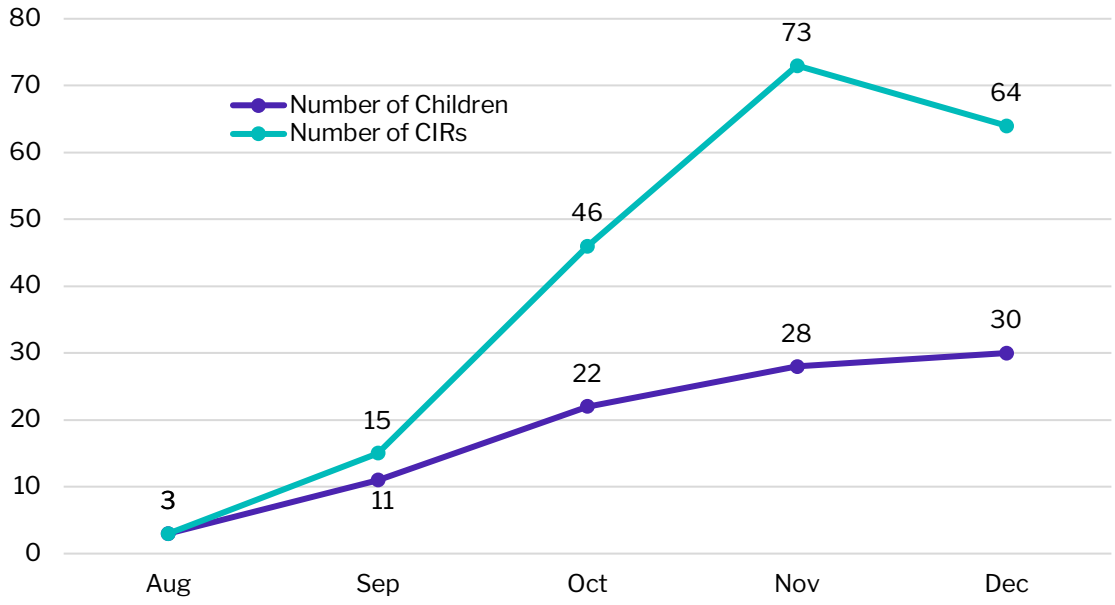
Number of CIRs	N	%
1	37	57%
2	12	18%
3	4	6%
4-6	5	8%
7-9	3	5%
10+	4	6%
Total	65	100%

Source: CIRs provided by the State to the Co-Neutrals

The number of reported critical incidents sharply increased in October and peaked in November 2025 (Figure 3). Among children with multiple critical incidents, 11 children experienced all critical incidents within one month, 10 children across two months, three children across three months, and three children across four months. One child experienced critical incidents in all five months for which CIRs were provided by the State.

Figure 3: Number of Critical Incidents per Month, by Individual Child

August – December 2025
N=201 CIRs, 65 unique children



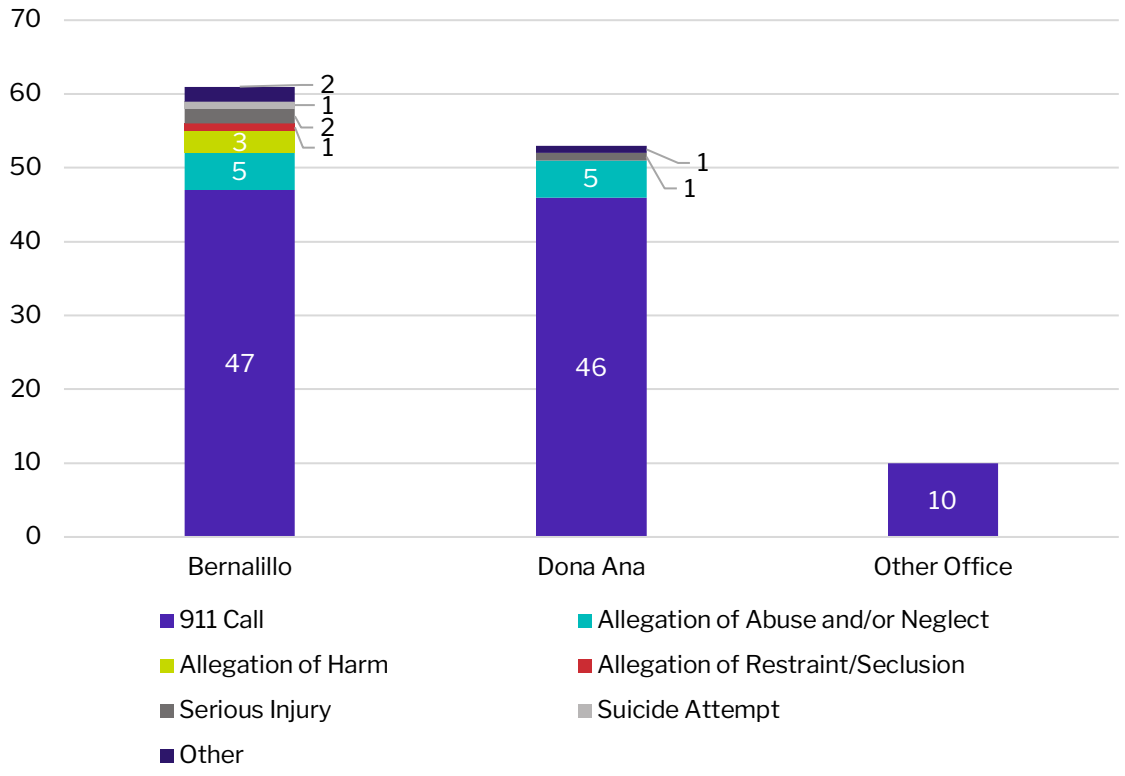
Source: CIRs provided by the State to the Co-Neutrals

Critical Incidents in CYFD Offices

As shown in Figure 1 above, more than half of all critical incidents occurred for children placed in a CYFD office, with the majority occurring in the Bernalillo and Dona Ana county offices. In total, 124 critical incidents occurred in CYFD offices, with the majority (103, 83%) reported as calls to 911 (Figure 4).

Figure 4: Critical Incidents in CYFD Offices, by Type

August – December 2025
N=124 CIRs



Source: CIRs provided by the State to the Co-Neutrals

The CIRs described calls made to 911 for a variety of reasons. Most 911 calls were made to report children as runaways when leaving the office without permission, including for children who left and returned within a few hours. Sixteen critical incidents for children placed in the office were categorized as allegations of harm, allegations of abuse and/or neglect, or serious injury. These CIRs described incidents such as children alleged to be hurting other children, children sending inappropriate photos to others, and children who sustained injuries. In some of these cases, the CIRs also noted that a report was made to CYFD's Statewide Central Intake (SCI) hotline as a report of abuse or neglect. A number of these CIRs described allegations of harm to staff by children rather than harm to children. One CIR was identified as an allegation of restraint, and describes a child being physically restrained by medical staff after 911 was called.

The second most frequent reported cause for calling 911 was for de-escalation and behavioral management; these 30 CIRs described situations in which emotionally dysregulated children engaged in aggressive behaviors with staff or with each other, children who were making threats or damaging property, and children who were being argumentative or non-compliant. Approximately 15 percent of calls to 911 were made to transport children who were experiencing medical or mental health crises and who needed to be evaluated and/or transported to a hospital (18 CIRs), and three calls were made to 911 due to concerns of children being under the influence of substances, such as marijuana. In five instances, 911 was called to evaluate the safety of children staying in the office. Specifically, two calls were made to report the sharing of inappropriate photos of a teenage child that the child had shared with other teenage children sleeping in the office, and three 911 calls were made to assess possible threats made to the office by people known to some of the children placed there.

Despite the onboarding of the Care and Behavior Support Specialists (CBSS) staff beginning in October 2025, the CIRs seem to show that the predominant behavioral management tool staff use to manage children placed in CYFD offices remains to contact law enforcement. While there are times when contacting law enforcement could be appropriate, this routine practice places children in state custody at risk for the criminalization of adolescent behaviors and the result of system involvement.

The CIRs also detailed instances of disagreements between CYFD staff, including between Protective Services Division (PSD) case workers and CBSS staff (who are within CYFD's Children's Behavioral Health Services [CBHS] Division). Situations described in the CIRs include allegations of staff antagonizing children and escalating situations rather than providing de-escalation and crisis management. At the same time, the CIRs paint a clear picture that many staff feel scared of the children they are being asked to supervise in the office, further contributing to the harmful narrative surrounding the needs of children in foster care.

Critical Incidents in Congregate Facilities

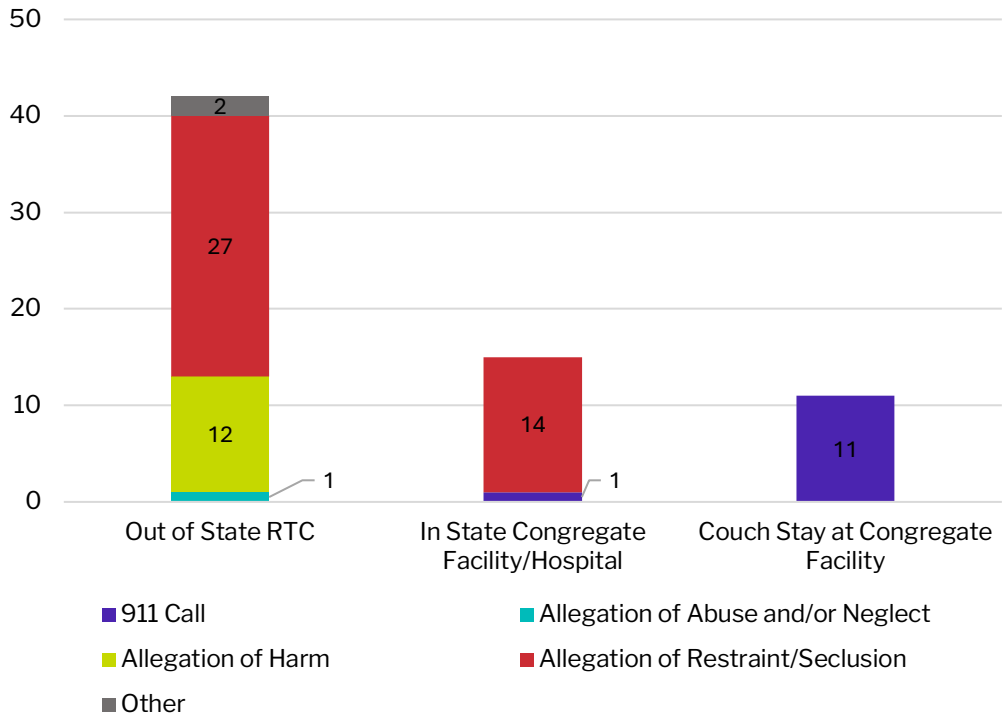
The second most common setting where reported critical incidents occurred were congregate facilities, inclusive of out-of-state residential treatment centers (RTCs), in-state acute hospital placements, shelters, and group home placements. Eleven CIRs were received for 911 calls for children placed as a "couch stay" in a group home or shelter; eight calls were made to report children running away from the facility; and the remaining three were made for behavior management of children as they transitioned from the office to their shelter/group home "couch stay" and did not physically occur at the congregate facility as reported on the CIR.[6] The one 911 call for a child at an in-state facility was made to have emergency medical services complete an assessment during a mental health crisis.

[6] A "couch stay" occurs when a child is placed in a group home or shelter overnight to sleep, but is not formally accepted into the group home or shelter as a placement.

One CIR reported an allegation of abuse or neglect for a child placed in an out-of-state RTC which was reported to that state's child abuse hotline for an investigation. Twelve CIRs were categorized by the State as allegations of harm to children placed in an out-of-state RTC. Upon review, these incidents all detailed self-harm behaviors by the child which almost always resulted in an additional physical or chemical restraint.[7,8] The majority of CIRs received for children placed in congregate facilities were for allegations of restraint and/or seclusion (41 CIRs or 60%) (Figure 5).

Figure 5: Critical Incidents in Congregate Facilities

August – December 2025
N=68 critical incidents



Source: CIRs provided by the State to the Co-Neutrals

[7] The Co-Neutrals have requested CYFD's and HCA's policies for regulating the use of restraints and seclusion for children in state custody; the policies have not been received as of the writing of this report. The State has provided a draft policy referencing that CYFD and HCA will work collaboratively when allegations of use of restraints or seclusion occur for children in CYFD custody in a congregate care setting, however no additional specifics have been provided.
[8] Two CIRs marked as "other" included an update regarding a child's RTC room assignment and request for a worker to provide consent for a child to have surgery.

Allegations of Restraint and/or Seclusion

The State reported 43 total critical incidents identified as an episode of restraint and/or seclusion between August through December 2025, with 95 percent occurring in out-of-state RTCs or congregate facilities such as hospitals (Figure 6). The Co-Neutrals identified 182 incidents of restraint and/or seclusion that occurred between October and December 2025 involving 27 unique children from independent reviews of children's records, only 20 of which had been identified in CIRs provided by the State (11%), resulting in a total of 200 episodes of restraint and/or seclusion experienced by children in state custody between August 18 and December 31, 2025.[9]

Figure 6: Allegations of Restraint and/or Seclusion Reported by the State[10]
August – December 2025
N=43 CIRs



Source: CIRs provided by the State to the Co-Neutrals

Allegations of Restraint and/or Seclusion Identified by the Co-Neutrals

The Co-Neutrals identified 182 allegations of restraint and/or seclusion that occurred between October and December 2025 experienced by 27 unique children. Specifically, there were 131 incidents of physical restraint (72%), 26 incidents of chemical restraints (14%), 18 incidents of both physical and chemical restraint (10%), and seven incidents of seclusion (4%) (Table 2).

[9] Because CIRs provided by HCA did not provide identifying information such as the child's FACTS case or person number or the facility where the critical incident occurred, the Co-Neutral could not analyze them for these purposes. Additionally, the Co-Neutrals identified one critical incident categorized as an allegation of abuse or neglect as reported to Statewide Central Intake that is not included in the restraint and/or seclusion totals.
[10] "Congregate facility/hospital" includes eight CIRs provided by HCA that do not identify a specific facility where the critical incident occurred, thus the number of restraints at out-of-state RTCs may be higher than reported in this figure. "Other" includes a restraint that took place in an out-of-state pre-adoptive home.

Table 2: Restraint and Seclusion Critical Incidents by Type

October – December 2025

Type of Incident	N	%
Physical Restraint	131	72%
Chemical Restraint	26	14%
Both physical and chemical	18	10%
Seclusion	7	4%
Total	182	100%

Source: Critical incidents identified by Co-Neutrals via FACTS case record reviews and OOS updates provided by the State

The majority of children experienced two or more incidents of restraint and/or seclusion (81%), with children experiencing an average of seven incidents per child (Table 3). All but one of the allegations identified by the Co-Neutral team occurred in a congregate setting, such as an out-of-state facility or a hospital, while one allegation of restraint occurred for a child placed in the Receiving Center in Bernalillo County.

Table 3: Number of Restraint and Seclusion Critical Incidents per Individual Child

October – December 2025

Number of Critical Incidents	N (children)	% (of all children)
1	5	19%
2	6	22%
3	5	19%
4-9	5	19%
10+	6	22%
Total	27	100%

Source: Critical incidents identified by Co-Neutrals via FACTS case record reviews and OOS updates provided by the State

The number of restraints and instances of seclusion being experienced by children in state custody in these facilities warrants constant oversight and supervision by the State to ensure children are safe and that their clinical needs are being met in a trauma-responsive manner.

Attachment E. Screening and Investigation of Reports of Child Abuse and Neglect

Under Remedial Order #2 (RO#2), the State is required to provide the Co-Neutrals each month with all reports of suspected child maltreatment involving children in State custody. The Co-Neutrals have been working with CYFD to better understand how CYFD screens and investigates allegations of abuse, neglect, and/or exploitation (AANE) by a child's caregiver in family-based and congregate care settings. This work is a critical part of CYFD's practice to protect the safety of children while in the care and custody of the State.

Based on a review of New Mexico's statutes, administrative codes and policies, and information gathered through discussions with CYFD and HCA leadership and staff, the Co-Neutrals' current understanding of this practice is summarized below.[1] The Co-Neutrals have also begun a case record review of screened-in referrals of suspected maltreatment of children in State custody by their caregivers in non-relative, kinship, and TFC resource home placements, and CYFD's investigations of these referrals. This case review is intended to inform the Co-Neutrals of CYFD's efforts, consistent with *Kevin S.*, to "build a system for placing children in out-of-home care in stable, safe, appropriate, community-based placements in the least restrictive environments."[2]

Statewide Central Intake – Child Abuse Hotline

In New Mexico, allegations of suspected child abuse, neglect, and/or exploitation are required to be reported to a Statewide Central Intake (SCI) child abuse hotline. CYFD's SCI is staffed with 61 positions and operates 24 hours a day, seven days a week to receive any report of suspected child abuse and neglect.[3]

For reports of maltreatment by a child's caretaker in a family-based setting, SCI assesses the reported safety concerns and decides whether the allegations will be screened out, or screened in and referred to CYFD's Protective Services Division (PSD) for an investigation.[4] However, for reports of AANE by a child's caregiver in an institutional or facility setting, SCI collects information from the reporter but does not assess or decide whether these reported allegations should be screened in and assigned as a referral for investigation by PSD. According to New Mexico's Administrative Code and for the purpose of PSD investigations, caregivers are defined as "an adult, parent, guardian or custodian in the

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[1] Documents reviewed include New Mexico's Children's Code, Section 32A; New Mexico Administrative Code, Title 8, Chapter 10, Parts 2 and 3; New Mexico Administrative Code, Title 7, Chapter 20, Part 11; and 4.1 Introduction to the Investigation Process.
[2] FSA, Appendix B preamble, p. 5a.
[3] CYFD's SCI also includes Reach NM, which is staffed 24 hours a day, seven days a week with 12 full time positions to receive and respond to texts from children and youth who want to report that they are a victim of abuse and neglect in their household or request support they may need.
[4] SCI determines based on the information provided by the reporter of suspected child abuse and neglect if the report meets PSD's criteria for accepting for investigation. Under NMAC 8.10.2, the criteria include that the alleged victim is under the age of 18, the child's caregiver is an alleged perpetrator, and that the situation reported may constitute abuse or neglect as defined by the Children's Code 32A-4. To make a screening decision, SCI also considers information from collateral contacts when available and a child abuse and neglect records check.

household who provides care and supervision for the child," which the agency through the administrative code has determined does not include caregivers in a facility setting (e.g., direct care staff in facilities such as residential treatment centers or group homes).[5]

As such, SCI assigns PSD caseworkers for investigation only reports of child abuse or neglect by a caregiver in a family-based setting. For any report of AANE of a child residing in a facility, SCI screens out the report and sends it to CYFD's Licensing and Certification Authority (LCA). However, under NMAC 8.10.2, SCI is required to make a record of and maintain all screened out reports "for one year after [the] date of the last activity concerning [the] client."

SCI is also required to "cross report all reports to the appropriate law enforcement agency." LCA or law enforcement may request that PSD investigators assist them with an investigation of AANE in a facility setting but PSD does not assume responsibility to conduct the investigation.

Monthly Data of AANE Reports Involving Children in State Custody

To date, CYFD has provided the Co-Neutrals with data that includes SCI reports screened in and assigned for a PSD investigation between August and November 2025. Most of these data are maintained and tracked in FACTS and do not include reports of AANE in facilities. Since these initial data submissions, the Co-Neutrals have been working with the State to ensure complete data and information are collected and provided responsive to this RO#2 commitment, and consistent with the definition agreed upon by the parties.

Currently, the Co-Neutrals' case review focuses on the data and information from August through October 2025 and includes referrals that have been substantiated and unsubstantiated.

PSD Investigations of Child AANE in Family-Based Setting

CYFD's overall approach to investigate reports of maltreatment of children in custody in a family-based setting is similar to other child welfare and child protection systems across the country. These similarities are reflected in New Mexico's current statutes and administrative codes and CYFD's documented policies, procedures and operational workflow for investigating child maltreatment in family homes.

When SCI refers an AANE report to PSD for investigation, the SCI intake worker uses a safety assessment tool to assign one of three priority levels to the referral, which determines the urgency and the time by when the assigned PSD investigator must initiate the investigation. Intake workers must staff all screening decisions with an SCI supervisor who must approve the screening decision and priority level assigned. The three priority levels are: 1) Emergency, requiring initiation of the investigation within three hours of the SCI supervisor's screening decision; 2) Priority 1, requiring initiation within 24 hours; and 3) Priority 2, requiring initiation withing five calendar days. Under NMAC 8.10.3, an investigation is considered initiated when the investigation worker has made face-to-face contact and assessed all alleged child victims in the SCI referral. The investigation must be

[5] The relevant procedure, NMAC 8.10.2, can be found here.

completed, with a supervisor approving the investigation decision, within 45 days of when the referral was accepted.[6]

Through FACTS, SCI assigns each screened in referral to an investigation supervisor in the county where the family resides. During after-hours and weekends and for Emergency or Priority 1 referrals, SCI also calls and emails the designated on-call county supervisor. These referrals are then assigned on rotation to an investigator. CYFD notifies PSD managers and CYFD leadership when a referral involving a child placed in a foster home has been screened in for investigation.

Prior to the assigned investigator beginning their casework, their supervisor is expected to conduct a pre-initiation staffing to discuss strategies to initiate the investigation timely and assess the safety of the alleged victims based on the information in SCI's report. CYFD has a pre-initiation staffing form designed to guide the discussion, when it occurs, including a review of the allegations, the number and location of the alleged victims, any related prior history in FACTS and background checks through New Mexico Courts, potential collateral contacts, documentation that should be gathered (e.g. photos of any injuries), as well as any safety concerns for the investigator, and whether assistance from law enforcement is needed if an officer is not already on the scene.[7] It is the supervisor's responsibility, when there is a supervisor, to complete the pre-initiation staffing form and upload it into FACTS.

If the investigator determines that they will not make contact with all alleged victims within the timeframe required to initiate the investigation, the investigator must complete CYFD's "Diligent Efforts Checklist" form, documenting in the investigation case record their efforts to timely locate and contact all alleged victims. The investigator is then expected to again staff the case with a supervisor and County Office Manager (COM), particularly in high-risk situations, to identify next steps to contact all alleged victims.

PSD's Investigation Procedures detail requirements and steps that investigation caseworkers and supervisors must follow to complete a thorough investigation.[8] The following are some key components of these required procedures, which, in addition to the timeliness of initiating and completing investigations, are focal points of the Co-Neutrals' case review.

- *Interviews:* the investigator must interview alone all alleged victims and other children in the household, unless a child is age 14 and over and exercises their right to refuse to be interviewed or if a child is non-verbal, in which case the investigator must observe the child. Interviews must be completed with all alleged perpetrators and non-offending caregivers and adults in the home. Other key interviews are with collateral contacts relevant to the investigation, including: any person who witnessed or has firsthand knowledge of the allegations, the incident, injuries, etc.; individuals who can verify

[6] A supervisor can approve an extension, not to exceed 30 days, and the reasons for the extension must be documented in FACTS.
[7] For Priority 2 referrals, a senior investigator can both assign investigations to a caseworker and complete the pre-initiation staffing.
[8] The relevant procedure, NMAC 8.10.3.10, can be found here.

information provided by the alleged victim(s) and perpetrator(s); professionals who have firsthand knowledge of the alleged victim(s) and perpetrators(s); caseworkers assigned to the child and foster home; other caretakers of the alleged victim such as daycare providers and therapists; law enforcement if involved; and, if known, the person who reported the allegations.

- *Investigations involving Native children:* CYFD must immediately notify the appropriate tribe of any investigation involving Indian children and obtain permission to investigate or conduct interviews with anyone who lives tribal land.
- *Home visit:* the investigator must visit the child's home(s) to collect information, assess the home environment, and complete a safety assessment as needed.[9]
- *Physical Examinations:* the investigator observes and documents injuries and/or arranges for medical and sexual abuse examinations when warranted. The investigator is required to place any photos and medical exam reports in the hard copy file of the investigation and summarize the content of this information in the FACTS record.
- *Allegations and Contradictions:* the investigator is instructed "to address all aspects of the reported abuse or neglect, as well as [assess] any unreported concerns" identified during the investigation.[10]
- *Investigation Decision:* the investigator, in consultation with a supervisor, applies a credible evidence standard to assess the investigation record and decide if the allegation(s) are substantiated or unsubstantiated. The investigation decision includes an assessment of a child's safety in their placement under review as "unsafe", "safe with a plan," or "safe," using a Structured Decision Making (SDM) tool. Whether or not a referral is substantiated, CYFD has to assess through its safety decision any next steps necessary to ensure the safety of children in custody, including removing children from the foster home, closing the home or providing supports to the family if needed to stabilize the placement if appropriate for a child.
- *Documentation:* the investigator must document their interviews, information gathered relevant to the investigation and "the factors the worker considers when they make the investigation decision…including when the decision is made to leave a child in a home."[11]

The case review undertaken by the Co-Neutrals examines the FACTS records to assess CYFD's implementation of each of the components outlined above, along with answering the following questions:

- Does it appear that the investigation records are complete with all the necessary and relevant information to reach a finding on the allegations?

[9] The home visit is waived if determined unsafe by law enforcement or the parent refuses entry, in which case the investigator will consult with a supervisor.
[10] The relevant procedures, NMAC 8.10.3.14 - 10.1 and -13.3, can be found here.
[11] The relevant procedure, NMAC 8.10.3.21, can be found here.

- Did the investigator conduct repeat interviews or take additional steps when necessary to address and/or clarify any contradictory information gathered from interviews and other evidence?
- How are investigators and their supervisors evaluating information gathered during their investigations and do their findings appear appropriate based on the investigative record?

The Co-Neutrals requested to review all training and guideline materials that CYFD uses to prepare investigators for their casework. In addition to the investigation requirements detailed in NMAC 8.10.3, CYFD shared its policies outlining how investigators and supervisors should document information in FACTS investigation records. Beyond the baseline pre-service NET training that all new caseworkers receive, which includes SDM and safety assessments, it is the Co-Neutrals' understanding that investigators do not receive any standardized, specialized training on investigation casework. CYFD reported that new investigators are expected to receive coaching in the field by an investigations supervisor and/or COM and may shadow experienced investigators during an investigation before they are assigned primary responsibility for a case. CYFD previously developed and offered caseworker training on the *credible evidence standard* used to determine whether reports are substantiated, but no longer provides this to investigation workers.

LCA Investigation of SCI Reports of Child Abuse or Neglect in Facilities

The Licensing and Certification Authority (LCA) is organizationally in CYFD's Behavioral Health Services Division and is charged with licensing children's behavioral health facilities, supporting these facilities with technical assistance to provide best practice trauma responsive care, and monitoring programming related to the health and safety of children in their care.[12]

To date, CYFD has provided the Co-Neutrals with no written documents regarding the policies and procedures that LCA follows to investigate AANE in facilities.[13]

As noted above, SCI reported it cross references all reports of alleged child AANE to law enforcement. LCA leadership explained that law enforcement has the lead authority to investigate suspected criminal child abuse and neglect in facilities. LCA reported that before taking any action it is expected to contact the appropriate law enforcement agency to confirm whether they are investigating any criminal aspects of the incident(s) reported and establish boundaries of what assessments LCA will complete alongside law enforcement, such as reviewing the facilities' policies and procedures and any history of violations. If law enforcement is not investigating, LCA reported that it may investigate the report through a facility licensure lens. LCA reported it has 10 program monitors and each is assigned to providers that LCA licenses and certifies, which is a total of approximately 40 facilities across New Mexico.

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[12] Additional information can be found here. LCA will be transitioning from within CYFD to be within HCA, with budget requests for this transition being discussed in the 2026 Legislative session.
[13] LCA leadership has verbally described their policies, procedures, and processes with the Co-Neutrals, and acknowledged that they are currently working to identify and formalize their processes.

When SCI sends reports of AANE to LCA, within 24 hours, a LCA manager is expected to staff the report with the LCA staff person assigned to the facility, assess the acuity of the allegations, and develop an action plan to visit the facility and begin a licensing investigation, either as the lead investigation agency or in coordination with law enforcement. The action plan may include determining if any alleged perpetrator has been placed on administrative leave, interviewing the child(ren) and staff involved, and requesting any video pertinent to LCA's review. LCA reported all of these actions should happen within 72 hours of receiving the report. LCA reported that when an investigation is completed by its staff, their unit should unsubstantiate or substantiate the allegations. According to LCA, if the allegations are substantiated, the facility may be placed on a corrective action plan and LCA may apply a hold on child admissions when deemed appropriate. Importantly, these substantiations are not recorded as AANE of children in state custody by a caregiver and are not included in New Mexico's reporting on the prevalence of maltreatment of children in custody, possibly allowing perpetrators the ability to work directly with children.[14]

LCA's investigative action plans, as described to the Co-Neutrals, do not focus on the child's well-being as the alleged victim. LCA reported that the permanency coordinator assigned to any alleged victim is expected to receive the SCI report and focus on the child's needs, but the information LCA compiles as part of its investigation remains within LCA's SharePoint records. As a result, these investigative records are not entered or maintained in FACTS where they could be available for review by any PSD staff.

This raises numerous safety concerns, including the lack of a well-established, routine practice that identifies individual staff who have abused or neglected children, and bars them from continuing to work directly with children at various facilities across New Mexico. This also leaves the State substantially less able to identify and examine patterns of child maltreatment in facilities, though LCA reported its program specialists are expected to track any recurring and concerning themes and trends reported at individual facilities that they monitor.

Again, all of the information that CYFD and LCA has shared about its processes to assess, investigate, and take corrective actions as a result of AANE investigations in facilities has been provided through discussions with Co-Neutrals and their staff. The State has not provided LCA's documented policies, procedures, and investigative standards. The Co-Neutrals requested and received some limited investigative documents that LCA has compiled for some incidents in facilities that resulted in the near fatality or fatality of children in CYFD custody.

[14] To date, the State has not provided a formal written process to the Co-Neutrals identifying how perpetrators of child abuse or neglect in facilities are prevented from working with children within other organizations. The State has identified a manual process by which perpetrators are reported to CYFD's background check unit, however it is unclear whether that process is sufficient.