New Mexico's Well-Being Checklists: Practical Tools for Addressing Well-Being

Beth Ann Gillia, JD, MA

Federal and New Mexico law recognize three critical goals for young people in foster care: safety, permanency, and well-being (42 U.S.C. \$629A(a)(2)(B); NMSA 1978, \$32A-1-3). It has been relatively easy to conceptualize and create performance indicators to measure whether, when, and how safety and permanency were achieved. Well-being, on the other hand, has been harder to define and more difficult to capture in discrete outcome measures. In an effort to build consensus about the meaning of well-being and to create tools that would help everyone in the child welfare system address well-being, New Mexico's Court Improvement Project (2012, 2011) developed two documents in the early 2000s: a booklet, Ensuring the Well-Being of Children in Foster Care: What's Needed and What You Can Do About It and a Child Protection Best Practices Bulletin. The Bulletin included a series of well-being checklists. In many ways, these tools anticipated what would be covered by the Administration on Children, Youth and Families' 2012 Information Memorandum on social and emotional wellbeing (Samuels, 2012a).

When considering the meaning of well-being for children in care, New Mexico started with the well-being outcomes used in the federal Child and Family Services Review (CFSR) process: (1) families have enhanced capacity to provide for children's needs; (2) children receive services to meet their educational needs; and (3) children receive services to meet their physical and mental health needs.

We also considered the best information available from the National Resource Center for Foster Care and Permanency Planning, the National Council of Juvenile and Family Court Judges, the American Academy of Pediatrics, the Child Welfare League of America, and the American Academy of Child and Adolescent Psychiatry. Each of these groups emphasized the importance of individually assessing the physical, mental and emotional health, and educational and developmental needs of maltreated children.

From this broad view, our approach to enhancing well-being coalesced. We decided, for example, to include preserving connections, as well as the transition to adulthood, in addition to the outcomes identified in the CFSR. Building on the idea that individual assessments were critical to informed case planning and decision-making, our tools focused on process, rather than outcomes. And, we embraced the idea that our tools should encourage all stakeholders—



judges, attorneys, case workers, CASA volunteers, service providers, and others—to take affirmative steps to ensure that children's well-being needs were being addressed.

By asking a series of concrete questions, the tools were designed to prompt everyone in the child welfare system to gather sufficient, high quality information through timely family centered meetings, mediation, and court hearings; medical, dental and vision exams (for example, EPSDT screenings); mental health assessments; and developmental and educational assessments.

Understanding a family's history, strengths, resources, and needs would then promote informed case-planning decisions about:

- placement,
- family time (visitation with parents, siblings, extended family),
- preserving important familial, community, and cultural connections for a child,
- enhancing parental capacity through services for parenting skills, substance abuse, domestic violence and mental health),
- appropriate psychotropic medication use,
- services needed to help a child meet developmental milestones and prepare to transition from foster care to independent adulthood,
- appropriate medical, dental and vision care, and
- appropriate educational services in the appropriate school setting (special education, early childhood programming, speech or occupational therapy, tutoring, etc.).

The checklists' questions and their answers would determine what additional information was needed and would help inform the steps to be taken next for a child and family.

Since their publication, the checklists have been (and continue to be) distributed broadly across the state's child welfare system. They are available on several websites and are used in cross-training programs when relevant. Though we have not measured how often, when, and by whom the checklists are used, the practices and principles promoted by the Bulletin and the checklists are now reflected in other practices and documents. For example, in 2006, the New Mexico Supreme Court adopted performance standards for parents' counsel, attorneys for older youth, and guardians ad litem that require each to attend to well-being as they gather information, plan their cases, and advocate in court (by focusing, for example, on requesting assessments and needed services for mental and physical health, visitation, education, recreational and social services, and many other things).

A decade after being written, the tools retain remarkable vitality and relevance. They have accomplished three important things:

- They have encouraged stakeholders to adopt a more holistic view of children and their needs, providing a broad framework for understanding that a child's education, culture, and social, emotional, and physical health are inter-related, as well as related to safety and permanency.
- They have clarified that everyone has a role in promoting a child's well-being, not only the caseworker, CASA volunteer, guardian ad litem, and attorney for older youth.
- They recognized that the well-being of children is tied to the well-being of parents.

Beth Ann Gillia, JD, MA is Director of the Corinne Wolfe Children's Law Center at the University of New Mexico School of Law. Contact: <u>bgillia@unm.edu</u>