

**REPORT FROM THE MAY 19, 2016
NORTHERN NEW MEXICO
FOUR-COUNTY BEHAVIORAL HEALTH SUMMIT
July 7, 2016**

Executive Summary

On May 19, 2016, County Commissioner Miguel Chavez, Chair of the Board of County Commissioners of Santa Fe County, welcomed over 65 participants invited to a four-county meeting in Santa Fe, New Mexico to discuss behavioral health¹ issues, services, and needs in northern New Mexico. The purpose of this four-county Behavioral Health Summit was “to serve as the first of multiple meetings designed to build a collaboration among northern New Mexico counties to address policy and resource gaps and barriers to serving and supporting residents experiencing behavioral health issues, especially those who do or might otherwise interact with publicly funded public safety, criminal justice, and health care systems.”

The morning was spent considering and discussing information from four presentations carefully designed to assure participants started with the same general information, followed by a tightly facilitated process of identifying the areas that needed further discussion to reach agreement and commitments to priority action steps. These presentations included a description of the *Stepping Up Initiative*, designed to reduce the number of individuals with behavioral health issues in America’s local jails. The outcomes of two state task forces (HJM 17 and SJM 4)² that provided data and recommendations about individuals with behavioral health needs in jails and specifically about the housing needs of such individuals were also presented.

Stepping Up Initiative

- 1. Convene or draw on a diverse team**
- 2. Collect and review prevalence numbers and assess individuals’ needs**
- 3. Examine treatment and service capacity**
- 4. Develop a plan with measurable outcomes**
- 5. Implement research-based approaches**
- 6. Create ways to track progress.**

¹ The term “behavioral health” is used in this report to mean prevention, treatment, and recovery supports for children, youth, and adults with or at risk of experiencing a mental illness (MI) and/or a substance use disorder (SUD). Behavioral health conditions are part of the larger health promotion, prevention, treatment, and supportive services impacting any individual or community.

² The HJM 17 report can be found at <http://www.nmcounties.org/wp-content/uploads/2014/07/HJM17FINAL.pdf>, and the SJM 4 report can be found at <http://www.nmcounties.org/wp-content/uploads/2015/12/SJM-4-Report.pdf>.

The morning presentations and discussions were followed by working discussion groups addressing issues and needs in three areas: prevention and engagement, crisis response, and re-entry and supports. These discussions, along with a panel of county officials and staff in the afternoon, resulted in recommendations about next steps, including:

- Hold a second behavioral health summit to continue the discussions and solidify multi-county commitments; include San Miguel and Mora County representatives. Assure consumers, service recipients, and people in recovery as well as representatives from tribes/pueblos; federal, state, and municipal governments; private funders; and education are included in future discussions.
- Proceed within individual counties to develop plans, programs, and capacity to serve persons with behavioral health needs; share results with other counties.
- Advocate for federal, state, and local resources for additional needed services such as housing; employment and education; peer-run services; medication assisted treatment for addictions; and preventative, rehabilitative, and recovery support services for individuals and families.

Participants also recommended and committed to the following six priority action steps:

PRIORITY ACTION STEPS

1. ***Crisis Triage Center***
2. ***Care Coordination/Navigation***
3. ***Data Capturing and Sharing***
4. ***Universal Screening of Children/Youth & Families***
5. ***Workforce Development***
6. ***Recovery Awareness***

1. Develop and fund a **crisis triage/drop-in center** to include professional and peer-led services.
2. Work collaboratively to address **care coordination/navigation** needs of individuals and families across counties, systems, and providers.
3. Develop capacity to **capture and share data efficiently and effectively**.
4. Assure **universal behavioral health screening** for children/youth and families at critical junctures in children's lives.
5. Develop a plan to address short- and long-term **workforce development** needs.
6. Develop common approaches to helping people understand **recovery is possible**.

Additional meetings and activities to pursue these action steps are being planned.