

MINUTES OF THE
SANTA FE COUNTY
HEALTH POLICY & PLANNING COMMISSION

March 2, 2018

Santa Fe, New Mexico

I. This regular meeting of the Santa Fe County Health Policy & Planning Commission (HPPC) was called to order by Reena Szczepanski Chair at approximately 9:00 a.m. on the above-cited date at 2052 Galisteo Street, Santa Fe, NM.

II. The following members were present:

Members Present:

Reena Szczepanski, Chair
Kim Straus, Vice Chair
Christa Coggins
Laurie Glaze
Vivian Heye
Bonnie Keene
Michael Munson
Don Reece
Carolyn Roberts
Anna Voltura

Member(s) Excused:

None

County Staff Present:

Patricia Boies, Director, Health Services Division
Rachel O'Connor, Director, Community Services Department
Alex Dominguez, Health Services Staff
Kati Schwartz, Mobile Health Van, CSD, RN
Leroy Kahn, Mobile Health Van Driver
Felina Rodriguez, Housing
Julia Valdez, Constituent Liaison

Others Present:

Jaime Michael, Doña Ana DHHS	Mara Tellez, Doña Ana DHHS
Petra Hill, Highlands	Jesse Cirolia, CSV
Ashley Mesa, Highlands	Pam Roy, SF Food Policy Council
Gillian Yong, Highlands	Miguel Chavez, Citizen
Genevieve David, Highlands	Christa Hernandez, NMDOH

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Ashley Chaffee, Highlands
Rebekah Moore, Highlands
Terrie Rodriguez, NMAHC
Sandra Dransfield, Citizen
Tom Starke, Behavioral Health Alliance
Michael Lucero, PMS/SFCGC
Georgia de Katona, SW CAR
Miquela Martinez, Highlands

Desiree Valdez, NMDOH
Julian Duran, BCBSNM
Kermit Cole, Rio Rancho
Megan Rodriguez, Citizen
Dawn Abriel, D.O.
Yuriy Sinyenko, RN
Betty Sisneros Shover, NAMI
Anne Albrink, NAMI

III. Introductions

Those present introduced themselves.

IV. Approval of Agenda

Former Commissioner Miguel Chavez asked that someone wishing to speak under Matters from the Public was en route and he asked that she be allowed to speak when she arrived.

Commissioner Reece moved to approve the agenda as presented. Commissioner Straus seconded. The motion to approve the agenda passed without opposition.

V. Approval of Minutes: February 2, 2018

Commissioner Keene suggested that the minutes read “County Commissioner Anna Hansen” in order to distinguish her from members of the HPPC.

Commissioner Reece moved approval as amended. Commissioner Keene seconded and the motion passed without opposition.

VI. Matters of Public Concern

Terrie Rodriguez advised those present that the New Mexico Alliance of Health Council will be having its annual meeting on April 3rd as a pre-conference for the New Mexico Public Health Association Conference. They will be looking at Senate Memorial 44 for the best ways to redo and reinstate the Maternal Child Health Act. Ms. Boies will be sending out details.

Desiree Valdez from the Department of Health announced the epidemiologist at DOH is out for the time being and she distributed her card as a contact in lieu of Ms. Gallagher.

VII. Presentations

A. Assisted Outpatient Treatment Program in Doña Ana County

Jaime Michael, Director of the Health and Human Services Department in Doña Ana County indicated that the Assisted Outpatient Treatment program (AOT) came about through Senate Bill 113. They have been building the program through a SAMHSA grant of \$700,000

per year for four years. Establishment of the program requires MOUs with other agencies such as the district attorney, the district court. Qualified petitioners include hospital administrators, family members and eventually the district attorney's office. The legislation outlined specifications such as AOT orders up to one year with possible renewal for a further year and criteria for eligibility, which are similar to civil inpatient treatment.

Ms. Michael stated targeted clients are those with a history of non-engagement through anosognosia – inability to recognize one's illness. "Non-adherence to your treatment plan is a brain-based illness; it's not someone being in denial or stubborn." She described the outpatient civil commitment process and the Assertive Community Treatment program for case management. She described the various components necessary to make the program work such as housing navigation, peer support, and evaluation services that collect data.

Ms. Michael described the court process which is modeled after that for inpatient treatment and leads to a court-ordered treatment plan and judicial review. While enrollment in AOT is non-adversarial and essentially "toothless," there is a court order that directs the treatment and the providers. The court orders are not part of the criminal process and do not lead to incarceration. There are periodic judicial reviews. Pick-up orders can be used. She spoke of the "black robe effect."

Ms. Tellez, Doña Ana DHHS, described the criteria for enrollment. She listed the resources required: a judge, attorneys, hospital-based professionals to establish treatment plans and do the affidavits, the district attorney as co-petitioner, Assertive Community Treatment (ACT) or case managers, program coordinator, housing navigator and the evaluator for the grant.

Ms. Michael said there are measures in place for family support. Certified peers are used as well. She gave a history of this type of program, which began with Kendra's Law in New York. It has proven to be both effective and cost-effective. They have had support from the Treatment Advocacy Center. She recommended starting slowly in order to not overwhelm the ACT team.

Responding to questions, Ms. Michael said:

- There have been 17 SAMHSA awardees for the AOT program. There are "communities of learning" whereby information is shared. Webinars are used for training and can be consulted
- All participants are experiencing serious mental illness and 70 percent have co-occurring addictions, as self-disclosed
- The case management is intensive
- They estimated 70 people in Doña Ana would be eligible for the program
- 90 percent of referrals come from hospitals; mobile crisis response is another source
- There are currently 12 ACT case managers serving 40 out of the 63 patients
- The qualified professional creates the treatment plan, not the judge
- They have worked with homeless veterans in conjunction with the VA
- The SAMHSA grant is for \$700,000 for four years. 20 percent of the budget goes for evaluation and tracking
- Repeat participants are not discriminated against

- They work to cover basic needs such as housing, transportation and food
- The program does trauma-informed care trainings

Ms. Michaels offered her assistance should Santa Fe choose to adopt the program.

Megan Rodriguez offered the example of her brother as evidence that there is lack of appropriate care for those with mental illness, particularly at the jail. She is working to get a treatment guardian.

Mr. Chavez advocated starting a new citizen jail oversight committee.

Chair Szczepanski lamented the retro attitude to legislation on this issue and hoped that next year there will be more progressive measures taken.

VIII. Matters from the Commission and Staff

A. Director's Report

Ms. Boies spoke of the Accountable Health Community's (AHC) efforts. A request for proposals for an evaluator for the AHC resulted in three submittals, and a committee has reviewed them and will be proceeding with their well-qualified selection. Monthly meetings with the AHC navigators are taking place, the most recent on food resources. She introduced Felina Rodriguez, a new County employee who will be performing navigation for residents of County housing.

The New Mexico Public Health Association has accepted a presentation on the AHCs in Santa Fe County and Bernalillo, which will take place at the annual meeting on April 5.

In-house Narcan training and distribution will be taking place using the mobile health van and Santa Fe Prevention Alliance, with the first to occur at the Nambe Community Center.

Ms. O'Connor gave updates on the Crisis Center, noting that SB 202 expanded the definition of a crisis center to include non-residential. The reimbursement rate will be set in a meeting with the Health and Human Services Department. She will provide further updates on the Crisis Center at the first BCC meeting in March, as well as information on the mobile crisis team. After the first year of planning, responsibility for the mobile crisis team will pass to the new primary partner. Negotiations continue. Location is to be determined by the BCC meeting on March 27th.

A new program on navigation services for the frail elderly by Christus in conjunction with the Fire Department is coming soon.

B. Other Matters from the Commission

Commissioner Straus distributed a booklet put out by Las Cumbres raising awareness of affordable housing issues.

IX. Future Agenda Items

- SHARE NM online resources/social determinants
- Jail re-entry
- Crisis Center partner
- Narcan training
- Information on the implementation of Santa Fe and Bernalillo AHC program
- Citizen oversight committee for the jail and possible family liaison

The April meeting location was tentatively planned for the Nambe Community Center.

Adjournment

With no further business, Chair Szczepanski declared this meeting adjourned at approximately 11:05 a.m.

Approved by:

Reena Szczepanski (pas)
 Reena Szczepanski, Chair
 Health Policy & Planning Commission

Respectfully submitted by:

Debbie Doyle (pas)
 Debbie Doyle, Wordswork



COUNTY OF SANTA FE)
 STATE OF NEW MEXICO) ss

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I Hereby Certify That This Instrument Was Filed for
 Record On The 10TH Day Of April, 2018 at 09:40:41 AM
 And Was Duly Recorded as Instrument # 1854586
 Of The Records Of Santa Fe County

Deputy *Esrella Martinez* Witness My Hand And Seal Of Office
 Geraldine Salazar
 County Clerk, Santa Fe, NM

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