MINUTES OF THE

SANTA FE COUNTY

HEALTH POLICY & PLANNING COMMISSION

January 20, 2022

Santa Fe, New Mexico

1. This regular meeting of the Santa Fe County Health Policy & Planning Commission (HPPC) was called to order by Chair Laurie Glaze at approximately 10:03 a.m. on the above-cited date.

Due to COVID-19 restrictions this meeting was held on the virtual platform Webex.

B. The following members were present:

Members Present:
Laurie Glaze
Steven Berkshire
Christa Coggins
Nelsy Dominguez
Sandy Dransfield
Jane Hajovsky
Antoinette Villamil
Susan Lyons

Member(s) Absent:
None
[one vacancy]

County Staff Present:
Patricia Boies, Director, Health Services Division
Jennifer Romero, CONNECT Program

Others Present:
Kathleen Tunney, Christus St. Vincent
Carrie Thielen, Presbyterian Health Services
Meredith Root-Bowman, Presbyterian Health Services
Leigh Caswell, Presbyterian Health Services
Arianna Trott, Aspen Solution
Annemarie McLaughlin, Santa Fe Community Foundation
Craig Schermershorn, Interested Citizen
Amy Sandoval, New Mexico DOH
Gijs Van Oort, Texas A&M
Kathy Armijo-Etre, Christus St. Vincent
C. **Introductions**

The commissioners introduced themselves.

Also present were Carrie Thielen, Manager of Regional Community Health and Meredith Root-Bowman, Director of Community Health, both of Presbyterian Healthcare Services.

Amy Sandoval is the Northeast Region Health Promotion Program Manager with the New Mexico Department of Health.

Annemarie McLaughlin is with the Santa Fe Community Foundation.

Arianna Trott is a program evaluator and counselor for Aspen Solutions.

Craig Schermerhorn stated he has a background in hospital administration.

Gijs Van Oort teaches at Texas A&M University.

D. **Approval of Agenda**

Commissioner Dransfield moved to approve and Commissioner Berkshire seconded. The motion to approve the agenda passed without opposition.

E. **Approval of Minutes: October 7, 2021**

Commissioner Lyons moved approval. Commissioner Hajovsky seconded and the motion to approve passed without opposition.

2. **Presentation on Hospital Community Health Needs Assessments for HPPC Member Input (Kathleen Tunney, Manager, Community Health at Christus St. Vincent and Carrie Thielen, Manager of Regional Community Health at Presbyterian Healthcare Services)**

Ms. Boies noted that both CSV and PHS are required to do community needs assessments, and the HPPC has always been involved in informing the needs assessments. This year both hospitals have been cooperating in focus groups, to avoid duplication and participant burn-out. This meeting is an opportunity for HPPC members to weigh in on the process.

Kathleen Tunney began a power point presentation, joining in a “tag team” approach with Carrie Thielen. Needs assessments are required every three years, and this year the two hospitals are partnering to align and maximize resources. Ms. Tunney noted they have slightly different approaches, CSV using a life span approach. Health indicators were discussed in focus group, to be followed by key informant interviews to elucidate gaps. The needs assessments will be published late spring/early summer, and the implementation plans will come out by the end of 2022.
The principal themes of the needs assessments are:
- Access to care and services
- Behavioral health
- Social determinants of health
- Senior health
- COVID implications

Issues that are involved in access to care and services include costs and inability to secure insurance, access to providers, transportation barriers, internet/broadband challenges, health literacy, and cultural and language barriers.

Commissioner Dransfield provided feedback from the County behavioral health leadership team, noting COVID-19 fears have led to delay of treatment. She spoke about the major health crisis stemming from the presence of fentanyl in the community.

Commissioner Berkshire pointed to the increase of violence and guns, especially among teens as an indicator. This relates to the pandemic and mental health issues. He said awareness of the health insurance exchange needs to be increased. Ms. Tunney noted that some people cannot afford the health insurance exchange, and some have trouble paying their 20 percent Medicare cost. Ms. Thielen noted that that figures into the health literacy issue.

Commissioner Villamil pointed out how complicated and difficult it is to secure insurance. Chair Glaze mentioned the price of prescription drugs, noting many people are unaware of reduced price programs.

Turning to the theme of behavioral health, some of the issues involved are drug and alcohol use with limited treatment options and providers, especially for Spanish-speakers and children. There is a lack of psych beds and transitional housing. There is concern regarding intergenerational trauma and domestic violence. Suicide, drug and alcohol related deaths are increasing.

Commissioner Dransfield mentioned how isolation due to COVID has exasperated long-standing problems. She said people are feeling “logey” – a feeling of disconnectedness. This is especially marked in the elderly and disabled. She mentioned online interventions such as Happy Talk and Talk Space. She anticipated wellness regression will become obvious when the data comes in.

Commissioner Dominguez said intertwined with this is lack of broadband and lack of facility with computer use.

Social determinants of health have been exacerbated by COVID-19. Included in this category are food insecurity, affordable housing, living wage, affordable childcare and transportation.

Commissioner Villamil stated in addition to the high cost of childcare, availability is an issue.

Commissioner Hajovsky pointed out that word of mouth is normally relied upon in finding services such as childcare, and this has diminished due to COVID.
Mr. Van Oort stated his organization in south Texas did a baseline survey regarding changes occurring during the pandemic, such as the impact of remote learning on students and teachers. He volunteered to make that data available. Stress and frustration have increased, but people are adapting.

Commissioner Berkshire noted the relationship between food insecurity and transportation challenges, given the dearth of grocery stores in the southern part of the city. He asked about the hospitals’ involvement in homelessness and affordable housing.

Regarding senior health, not only are the seniors themselves experiencing isolation with accompanying physical and mental health problems, their caregivers are having burnout. Food insecurity is also an issue.

Ms. Sandoval said they are seeing frustration regarding technology with seniors. This is more extreme due to the reliance on technology to bridge the gap where in-person visits are impossible.

Commissioner Dominguez stated this is also the case with non-English speakers.

Commissioner Dransfield said caregiver availability is also an issue, leading to domestic violence, drug use and suicide.

Commissioner Villamil noted the same issues arise with new mothers and babies and the need for navigators. It was pointed out that Kitchen Angels was a model for checking in with otherwise isolated people. Depression and anxiety are alleviated by home visits.

**General Discussion**

Commissioner Coggins said she found the cooperation between the hospitals heartwarming. She asked if the key informants would be interviewed jointly and speculated that at some point in the future a single needs assessment could be produced, increasing efficiency.

Ms. Tunney said the two entities have different approaches and are both involved in larger systems, making a single report unlikely.

Commissioner Berkshire brought up other possible partners such as the Indian Health Services and La Familia. Ms. Tunney said they have reached out to the Indian Health Services with a focus on Native American health. La Familia is a key informant. Ms. Thielen said Presbyterian works closely with tribal health councils but more remains to be done.

Commissioner Dransfield mentioned that the HPPC makes recommendations to the Board of County Commissioners and broached the possibility of recommending having mailers sent to county residents advising them of services including CONNECT. Chair Glaze said she thought the County had on occasion sent notices in utility bills, for instance, regarding vaccine clinics.

Ms. Boies said they will be using ARPA funding for a broad public awareness campaign.
Commissioner Berkshire pointed out that many people get their utility bills on line. He suggested making use of churches in making people aware of services. Ms. Boies said they are envisioning a multi-faceted campaign.

Commissioner Dominguez added Spanish-speaking radio to the campaign. She recommended funding non-profits and thereby making use of trusted messengers.

Chair Glaze asked how ARPA funds would be used to further items in the needs assessments. Ms. Tunney said things are still in early stages.

Commissioner Dominguez said COVID-19 has illuminated inherent vulnerabilities and long-term policy solutions are called for. She asked how the needs assessments trickle up to the State Health Improvement Plan.

Ms. Tunney indicated progress has been made, in particular with coalitions. Commissioner Dransfield agreed that community groups coming together are doing things that haven’t happened before. She gave examples of non-profits accomplishing things and added there is reason for hope.

Ms. Root-Bowman explained ways the needs assessments flow up to the State Improvement Plan and Department of Health, and flow down to other entities. She recommended continuing to encourage collaborations.

Ms. Armijo-Etre, Vice President, Mission and Community Health at Christus, commented that there have been great collaborations since 2011, using results based accountability as a framework. This emphasizes population health and wellbeing as opposed to individual programs. She spoke in favor of adequate funding to non-profits. She said the changes being made are unprecedented.

4. **Matters from Staff**

Ms. Boies gave an update on American Rescue Plan Act funding received by the County, stating $2 million will be provided for contracting with a number of CONNECT organizations for navigation and for providing housing, food, and utility assistance. Additionally, under a memorandum of agreement with the City, $1 million will be provided for the City to administer cash assistance. Additional ARPA funds will be used for other housing needs.
5. **Matters from the Commission**

Chair Glaze said she attended a presentation on behavioral health at the New Mexico Association of Counties. This group plans to enter a memorial to create a study group to look at jail issues. She was asked whether the HPPC would be interested in supporting the memorial. Ms. Boies said this would require a special meeting, and there would be constraints that would have to be abided by under the notice requirements for public meetings and the legislation’s short session, and she would explore calling such a meeting.

The next meeting was tentatively scheduled for Thursday, March 24th at 10:00.

6. **Adjournment**

This meeting was declared adjourned at approximately 11:35 a.m.

Approved by:

[Signature]

Laurie Glaze, Chair
Health Policy & Planning Commission

Respectfully submitted by:

[Signature]

Debbie Doyle, Wordswork