

MINUTES OF THE

SANTA FE COUNTY

HEALTH POLICY & PLANNING COMMISSION

February 1, 2019

Santa Fe, New Mexico

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

II. The following members were present:

Members Present:

Laurie Glaze, Chair
Laura Brown
Christa Coggins
Barry Cooney
Nelsy Dominguez
Bonnie Keene
Michael Munson
Kim Straus

Member(s) Absent:

Carolyn Roberts [excused]
Sandy Dransfield [excused]

County Staff Present:

Patricia Boies, Director, Health Services Division
Rachel O'Connor, Director, Community Services Department
Julia Valdez, Constituent Liaison

Others Present:

Ron Hale, NMAHC
Terrie Rodriguez, NMAHC
Amara Nash, Farmers Market
Kristen Carmichael, Southwest Care
Susan Carter, Life Healing Center
Carolyn Moore, Nurses with Heart
Meredith Root-Bowman, Presbyterian
Aurora Trujillo, CSV
Dawn Abriel, Bright Heart Health
Valentina Livingston, BHMC
Beruta Woody, BCBS

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III. Introductions

Those present introduced themselves.

IV. Approval of Agenda

Commissioner Coggins moved to approve and Commissioner Straus seconded. The motion to approve the agenda passed without opposition.

V. Approval of Minutes

January 4, 2019: Commissioner Straus suggested a clarification to Commissioner Keene's remarks on page 4. The amended language: Commissioner Keene said it could be expensive initially for people that have not had recent healthcare coverage. Access is still an issue.

Ms. Rodriguez stated the proper terminology should be Maternal Child Healthcare Plan Act.

Commissioner Dominguez said the correct spelling is Colin Baillio.

Commissioner Straus moved approval with corrections and Commissioner Brown seconded. The motion carried unanimously.

VI. Matters of Public Concern

Ms. Rodriguez announced Public Health Day will be held February 14th at the Roundhouse with presentations beginning at noon.

Commissioner Coggins stated there will be free workshops on RBA, results-based accountability, at the Community Foundation as part of the spring grant cycle. The workshops will be held February 7th, 8:30 to 11:30 and February 15th, 2:00 to 5:00. They will be conducted by Michele Lis.

Ms. Carmichael said Southwest Care is launching a needle exchange van program. This service is also offered at their clinic off Harkle. This is in partnership with the Department of Health and the Interfaith Shelter.

Ms. Trujillo indicated Anchorum St. Vincent is opening their grant cycle. Attendance at a workshop is mandatory and there is more information on the website.

Ms. Nash said nutrition trainings are available to community health workers from the Farmers Market. There will be one on basic nutrition – following the colors of the rainbow – and another on infant needs.

Ms. Livingston stated Building Healthy Military Communities has launched their first strategic state action plan. Issues identified include underemployment, mental health, substance abuse, physical fitness and nutrition, and family readiness.

VII. Presentations

A. Health Council Legislation – HB 67 and HB 137

Ms. Rodriguez stated her group has been working on this type of legislation for a number of years and this follows Senate Memorial 44, which would update the Maternal and Child Health Plan Act which has been in place over 25 years.

Mr. Hale gave a history of health councils in the state. The original concept was that each county would have a health council to look at health needs in their jurisdiction and develop programs and services. State funds were available for a coordinator and for services. After reaching a high of \$2.8 million per year the funding was suspended in 2010. There are now 39 health councils, all with their roots in the MCHPA. Over time, the focus has moved from exclusively mothers and children to a more comprehensive approach.

Regarding SM 44, Mr. Hale said this endeavored to take a broad look at the extant health councils. Three counties, including Santa Fe, are closely tied to their county government; some others are 501(c)(3)s.

Ms. Rodriguez indicated the intent is to bring back structural and financial support. In some cases health councils run programs but in general their function is one of evaluation. The New Mexico Alliance of Health Councils (NMAHC) is not intended to be an umbrella non-profit or a fiscal home, but rather partners. She emphasized that not all counties have the wherewithal to support their health councils financially. Some get support from their city or hospital.

Commissioner Straus said he was sorry to see the MCH go away. He noted the state is providing \$5.4 million for pre-school development grants and early learning councils in collaboration with CYFD, DOH and the Public Education Department.

A discussion ensued regarding the distribution of funds to the various health councils.

Commissioner Cooney said there was a severe paucity of access in rural areas and asked if there was anything in the bills to address that problem. Ms. Rodriguez said there was and mentioned some health councils have innovative ideas such as scholarships for medical training for local residents. Money sometimes goes to clinic development and housing for providers. Counties on the border have their own set of problems. Mr. Hale said through the NMAHC, successful programs have been disseminated and resources combined.

Ms. Rodriguez stated there need not be changes to HPPC's current model.

Ms. O'Connor noted the HPPC has changed over the years. The indicators developed by the HPPC through the *Health Action Plan* have informed Community Services' activities. A resolution was passed by the County Commission in 2010 outlining the duties and purview of the

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federal prevention

HPPC and this differs in some ways from the proposed legislation. “I don’t think it would take much of a language change to align us.”

Ms. Boies said the points of conflict include the legislation envisions an executive body rather than an advisory/recommending body. For example, HB 137 says, “A health council shall: (1) monitor healthcare programs and services.” Currently monitoring is an agency function rather than an HPPC function. The same is true for developing programs. Additionally, there is also some question of a county being able to have more than one council.

Commissioner Straus indicated he saw no problem with there being deliverables and asked Ms. O’Connor what she saw as resolving the conflict. She said possibly changing “shall” to “may” could serve the purpose. Ms. Boies suggested, “Nothing in this legislation shall affect Santa Fe County and its Health Policy and Planning Commission and its relationship with Santa Fe County.” Commissioner Brown said that could be extended to other counties with a similar arrangement.

Mr. Hale noted it is up to the county to designate one official council. The functions outlined in HB 137 come from the MCH Plan Act and the evaluation of health councils, which identified the most common roles played by the local councils. The monitoring function came from Santa Fe’s MCH’s Program Watch and overall gap analysis.

Commissioner Straus said he saw the legislation as intended to strengthen councils that have struggled in the past. He noted all bills are subject to amendment.

Ms. O’Connor pointed out the legislation as written would require full-time staff for HPPC alone, when the current priority is toward implementing the Accountable Health Community. This would change CSD’s relationship with the BCC. However, changing “shall” to “may” could provide for flexibility and discretion. Mr. Hale said changes would be up to the sponsors.

Commissioner Straus noted that the language in BCC Resolution 2010-240 speaks of keeping abreast of developments in healthcare which corresponds to monitoring. Chair Glaze said monitoring implies a more formal activity. Commissioner Brown said it could be a difference between verbal and written. Commissioner Dominguez said leaving “shall” in place could impose too much of a burden on smaller councils.

Commissioner Keene asked about councils of sovereign nations. Ms. Rodriguez stated they had tribal consultation and six tribes have councils and four more want them. Some are independent and some are completely affiliated with the tribe. They appear to be supportive of the legislation. Mr. Hale said since the tribes are a different jurisdiction there would not be a problem with having a county health council and a tribal health council; both would be in line for funding. These jurisdictional councils would be different from single-issue councils.

Mr. Hale noted the wording in the proposed legislation is intentionally broad. Ms. Rodriguez said they will talk with the sponsors regarding possible language changes.

VIII. Matters from the Commission and Staff

A. Director's Report

Ms. Boies said the Board of County Commissioners considered two resolutions calling for legislative support for recommendations from the January HPPC meeting – the New Mexico Health Security Act (HB 295 and SB 279) and Medicaid Buy-in (HB 416). Both resolutions passed unanimously. Previously the Board of County Commissioners expressed support for HB 43, which requires the state Behavioral Health Division to create a framework for intervention for individuals to address their behavioral health needs while incarcerated. Other HPPC-recommended legislation the BCC has supported with resolutions are for dental therapy and for NM grown fresh fruits and vegetables for school meals.

Commissioner Cooney asked who lobbies for Medicaid Buy-in. Ms. Boies said there is an umbrella coalition that includes Health Action New Mexico and the Center for Law and Poverty.

Ms. Boies reported that Unite Us has been selected as the software system provider for the Accountable Health Community. Two HPPC members sit on the Accountable Health Community Advisory Committee and observed a demonstration by Unite Us. All providers with whom the County contracts will be using the Unite Us system, which will take a few months to implement.

Commissioner Straus asked if the County was applying for capital outlay funding for the Galisteo building. Ms. O'Connor stated they are partnering with Bernalillo County to ask for FF&E funds – furniture, fixtures and equipment – for the crisis center. The bulk of the funding is coming from other sources but they might go in for an operating bill to diversify the funding.

Ms. O'Connor said a letter of interest request was released for the census project, and as more funding may be required, an RFP with more funding available may be released soon.

Chair Glaze pointed out that in terms of the census project, there is a natural overlap of outreach efforts among the counties.

Commissioner Straus noted that 100,000 household have been located by private sources that were not counted previously. He said New Mexico is the hardest state to count. Ms. Boies said the fear of a citizenship question remains even if the question ends up not appearing.

Ms. O'Connor mentioned that staff is working to develop a youth division, with an emphasis on behavioral health issues. A letter of interest request was issued for a youth strategic plan.

Commissioner Brown asked if there was anything in front of the legislature for youth behavioral health services. Ms. Boies said there is nothing youth-specific, but the governor will probably be addressing something along those lines.

Commissioner Straus indicated that Wayne Lindstrom of the Human Services Division's Behavioral Health Services Division has said children and youth behavioral health will be the focus this year.

Ms. O'Connor stated CSD and the Fire Department got a DOH grant for follow-up on people who have experienced drug overdoses.

C. Other Matters from the Commission

Referring to the Washington measles epidemic, Commissioner Keene asked if this was going to be a problem given the large migrant population. Commissioner Straus stated he understood children crossing the border were given medical exams but he did not know about vaccinations. Commissioner Brown said she attended a conference where it was noted that Santa Fe and Los Alamos have the highest rate of conscientious objectors to vaccination.

Ms. Carmichael mentioned a training by the Santa Fe Fire Department, attended also by County firefighters for trauma-informed mobile integrated health, i.e., how the Fire Department can serve at-risk community members.

IX. Future Agenda Items

- Health Action Plan review and update
- DOH: vaccination rates
- Presbyterian Needs Assessment (March)

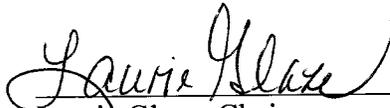
X. Announcements

A. Next HPPC meeting Friday, March 1, 2019, 9 a.m., Santa Fe County Community Services Department Conference Room, 2052 Galisteo Street

XI. Adjournment

This meeting was declared adjourned at approximately 10:50 a.m.

Approved by:


 Laurie Glaze, Chair
 Health Policy & Planning Commission

Respectfully submitted by: COUNTY OF SANTA FE) HEALTH POLICY & PLAN M
 STATE OF NEW MEXICO) ss PAGES: 6

Debbie Doyle, Wordswork I Hereby Certify That This Instrument Was Filed for
 Record On The 5TH Day Of March, 2019 at 03:13:28 PM
 And Was Duly Recorded as Instrument # 1880420
 Of The Records Of Santa Fe County



Santa Fe County
HPPC: February 1, 2019

Witness My Hand And Seal Of Office
 Deputy  County Clerk, Santa Fe, NM
 Geraldine Salazar 6